

PD 7000/24988

(Requestor's Name)

(Address)

(Address)

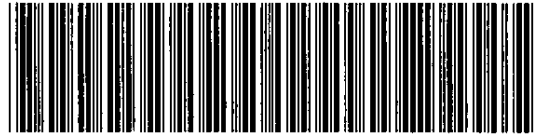
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_



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11/16/07--01034--002 \*\*78.75

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
11/20

Special Instructions to Filing Officer:

Valorie York GAVE  
AUTHORIZATION BY PHONE TO  
CORRECT Articles I & II  
DATE 11/20/07  
DOC. EXAM MRS

Office Use Only

**COVER LETTER**

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** Val's Processing  
**(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

\$70.00 Filing Fee  
 \$78.75 Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

**FROM:** Valorie York  
Name (Printed or typed)

325 SW Otter Run Place  
Address

Stuart, FL 34997  
City, State & Zip

561-797-3594  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME**

The name of the corporation shall be:

Val's Processing Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:  
325 SW Otter Run Place  
Stuart, FL 34997

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Any & All Lawful Business

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

List name(s), address(es) and specific title(s):

Valorie York  
325 SW Otter Run Place  
Stuart, FL 34997  
Owner/President

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Valorie York  
325 SW Otter Run Place  
Stuart, FL 34997

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**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Valorie York  
325 SW Otter Run Place  
Stuart, FL 34997

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

Valorie York  
Signature/Registered Agent

11-9-07  
Date

Valorie York  
Signature/Incorporator

11-9-07  
Date