

DEC 10, 2008 2:02PM
Division of Corporations

CAPITAL CONNECTION

NO. 641

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I200000000257
Phone : (850) 224-8870
Fax Number : (850) 222-1222

RECEIVED
08 DEC 10 AM 8:00
DIVISION OF CORPORATIONS

FLORIDA PROFIT/NON PROFIT CORPORATION

Susan L. Valliere Family, Inc.

Certificate of Status	0
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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CAPITAL CONNECTION

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ARTICLES OF INCORPORATION SECRETARY OF STATE
TALLAHASSEE, FLORIDA
OF

Susan L. Valliere Family, Inc.

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I: NAME

The name of the corporation is **Susan L. Valliere Family, Inc.**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is **2600 SE Ocean Blvd., # O-15, Stuart Florida, 34996**

ARTICLE III: CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is one hundred (200,000) shares having a par value of (\$1.00) per share.

ARTICLE IV: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **A. JAMES VALLIERE, 79 S. RIVER RD., STUART, FL 34996.**

ARTICLE V: OFFICERS & DIRECTORS

The name and address of the initial Officer and Director of the corporation is:

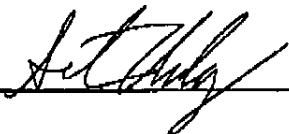
Susan L. Valliere, President/Director, 2600 SE Ocean Blvd., # O-15, Stuart Florida, 34996

ARTICLE VI: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Your Capital Connection, Inc., 417 E. Virginia St., Suite 1, Tallahassee, FL. 32301.

The undersigned has executed these Articles of Incorporation this 10th day of December 2008.

"Your Capital Connection, Inc. by, Seth Neeley, Client Representative"



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: SUSAN L. VALLIERE FAMILY, INC.

2. The name and street address of the registered agent and office is: _____

A. JAMES VALLIERE

79 S. RIVER RD., STUART, FL 34996

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

