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COVER LETTER

	Filing Section sion of Corporations		
,,,,,		110	
SUBJECT:	Sunray Pro Clea	ning LLC	
	Name of Limited Liab	ility Company	
The enclosed	Articles of Organization and fee(s) are submitte	ed for tiling.	
Please return	all correspondence concerning this matter to the	following:	
	Amar Kurtagic		
	Name (of Person	
			20:
_	Firm/C	Company	_ 25
	11157 Irlindless Daire Ea	St S	AR 21
_	11257 Windfree Drive Ea	lress S	
	Jacksonville, Florida, 322 City/State a amar 888 @ Comca	5 7 四三	025 MAR 25 AM 9: 4:
_	City/State a	and Zip Code	÷ 5
	E-mail address: (to be used for future	annual report notification)	
	ormation concerning this matter, please call:		
ļ.	tmar Kurtagic at 904	, 7d4- OS4O	
	Name of Person Area Code	Daytime Telephone Number	
Enclosed is a	check for the following amount:		
□\$125.00 Fi	Certificate of Status Certi	55.00 Filing Fee & TS 160.00 Filing F Certificate of Status Certified Copy (additional copy is encourage)	. &
	Mailing Address New Filing Section	Street Address New Filing Section Division The Centre of Tallahassee	
	Division of Corporations	the Centre of Tananassee	

P.O. Box 6327 Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

RTICLE II - Address:	nray Pro Cleani contain the words "Limited I	Sidomity Company, 1	G.G.C., W. G.G.C.	
	reet address of the principal of	ffice of the Limited L	liability Company is:	
<u>Pr</u>	incipal Office Address:		Mailing Addre	<u>ss</u> :
11257 Win	dtree Drive fast ville, Florida, 32257	<u> 112</u>	157 Windtree Dr	ive East
Jachsoni	rille, Florida, 32257	<u> </u>	acksonrille, Florida	1, 3445 T
ARTICLE III - Registere The Limited Liability Counother business entity with	d Agent, Registered Office, on pany cannot serve as its own han active Florida registratio	Registered Agent, Yo n.)	's Signature; ou must designate an indi	vidual of NHA SAMPLE
ARTICLE III - Registere The Limited Liability Cou another business entity wit	npany cannot serve as its own the an active Florida registration are address of the registered	Registered Agent. Yound n.) agent are: Kurtagic	's Signature; ou must designate an indi	ري. دي.
ARTICLE III - Registere (The Limited Liability Con another business entity wit	ripany cannot serve as its own than active Florida registratio areet address of the registered Ama/	Registered Agent. Yound agent are: Kurtagic Name CC Drive East	ou must designate an indi	MALE WHASSEE FL
ARTICLE III - Registere (The Limited Liability Con another business entity wit	ripany cannot serve as its own than active Florida registratio street address of the registered Ama/ 11257 Windtr Florida street address	Registered Agent. Youn.) agent are: Kurtagic Name Ce Drive East s (P.O. Box NOT acc	ou must designate an indi	ري. دي.
ARTICLE III - Registere (The Limited Liability Con another business entity wit	ripany cannot serve as its own than active Florida registratio areet address of the registered Ama/	Registered Agent. Youn.) agent are: Kurtagic Name Ce Drive East s (P.O. Box NOT acc	ou must designate an indi	ري. دي.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

	Title: "AMBR" = Authorized M	ember	Same and Address: Amar Kurtagic		
	"MGR" = Manager Amar Kurtagic	MGR	11257 Windtree Drive East Jacksonville, Florida, 32257		
	Amer Kartonic	1 101	Jacksonville, Florida, 37257	•	
	MGR		Maria Gabriela Kurtagic 11257 Windtree Drive Cast Jacksonville, Florida, 32257		
				2025	
				025 MAR	T.
				25	Ĩ
	(Use attachment if necessa	ıry)	merup Cultur Cultur Cultur	1 :6 HV	
ARTICI	.E.V: Effective date, if other	er than the date of	filing: (OPTIONAL)	-1	
the date Note: L	of filing.) f the date inserted in this bl	ock does not mee	it the applicable statutory filing requirements, this date will not		
	ment's effective date on th		State's records.		
ARTICI	.E VI: Other provisions, if a	.ny. 			
	REQUIRED SIGNATUL	38.			
	aft.	w f			
	This docu Lam awar constitue	ment is executed e that any false in s a third deorge fe	per or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.		
		Amar	Kurtagic Typed or printed name of signee		
		'I	Typed or printed name of signee		
	\$125 00 Filing Fee for	Articles of Orogn	Filing Fees; nization and Designation of Registered Agent		

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)