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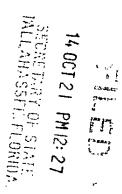
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J. Shivers OCT 22 2014

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: All Year Service LLC	
	nited Liability Company
The enclosed Articles of Organization and fee(s) a	re submitted for filing.
Please return all correspondence concerning this m	natter to the following:
	9
Jose Guerra	
	Name of Person
All Year Service LLC	Firm/Company
	ran/Company
1976 sw 67th terrace	
.'	Address
North Lauderdale, florida, 33068	
C	City/State and Zip Code
eldurofl@hotmail.com  F-mail address: (to be use	d for future annual report notification)
	·
For further information concerning this matter, plea	ase call:
	`
Jose Guerra at (	754 ) 2358695  Area Code Daytime Telephone Number
	,
Enclosed is a check for the following amount:	
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee &	<b>∠</b> \$155.00 Filing Fee & □\$160.00 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status &
	(additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing Address	Street/Courier Address
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassec, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:		
All Year Service LLC		
(Must end with the words "Limited	Liability Company, "L.L.C	.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal of	Tice of the Limited Liability	y Company is:
Principal Office Address:	Mailing Address:	
1976 sw 67th terrace, North Lauderdale, floric 33068	same	<del></del>
ARTICLE III - Registered Agent, Registered Office, & The Limited Liability Company cannot serve as its own lanother business entity with an active Florida registration. The name and the Florida street address of the registered.	Registered Agent. You mus	
-	agent are.	
Alfredo Buitrago Jr. Name		_
80 North East 48th Court		
Florida street address (P.O. Box	NOT acceptable)	_
Forth Lauderdale, Florida	FL 33334	<u> </u>
City	Zip	
Ilaving been named as registered agent and to accept ser the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the obl.  Chapte  Registered Agent's Signal  (CONTINUE)	the appointment as register of all statutes relating to the igations of my position as re er 605, F.S	red agent and agree to act in this proper and complete performance egistered agent as provided for in
Page 1 of 2		TO P IT

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ARTICLE IV-