

L03000021709

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000214490 2)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

DIVISION OF CORPORATION

03 JUN 16 AM 11:40

RECEIVED

LIMITED LIABILITY COMPANY

CAROLINA'S COIN LAUNDRY #1, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 JUN 16 AM 11:38

FILED

JB
10-11-12

H 030 00 214 490

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CAROLINA'S COIN LAUNDRY #1, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

6935 PRADO BOULEVARD
CORAL GABLES, FL 33143

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

MARIA E. TEJIDOR

Name

6935 PRADO BOULEVARD

Florida street address (P.O. Box NOT acceptable)

CORAL GABLES FL 33143

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company 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 as provided for in Chapter 608, F.S.


 Registered Agent's Signature

(An additional article must be added if an effective date is requested)


 Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

LEON E. TEJIDOR

Typed or printed name of signer

 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

03 JUN 16 AM 11:38

 ATTORNEY
 AND
 FLEET

H 030 00 214 490