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UIVISION OF CORPORATION

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TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: Coastal Carpot & Tile Cleaning (Name of Limited Liability Company)	LLC.
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Brandon or Rocio Bressia (Name of Person)	
Coastel Carpet Clearing.	DIVISION OF COTO
1980 Polo lake dr. E	PH 2: 58
Wellinston, FC 33414 (City/State and Zip Code)	•
For further information concerning this matter, please call:	
(Name of Person) at (O) O O O O O O O O O O O O O O O O O	

STREET ADDRESS:

TO:

Registration Section

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 22, 2003

ROCIO BRESCIA 1980 POLO LAKE DR E WELLINGTON, FL 33414

SUBJECT: COASTAL CARPET & TILE CLEANING L.L.C.

Ref. Number: W03000024033

We have received your document for COASTAL CARPET & TILE CLEANING L.L.C. and check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$25.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers Document Specialist

Letter Number: 203A00047718

EIVISION OF CURPOWNICES

ARTICLE I - Name: The name of the Limited Liability Company is: Coastal Carpet # tile Cleaning ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

| 1980 | Polo | ake dr. E. Same
| Welling 700 | Fr. 373414|

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

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

ROCIO BESCIA

Name

1980 Polo loke di. E

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

Wellington FL 33414

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 al 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 Algent's Signature

(CONTINUED)

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member MGRM" = Managing Member	Brandon Brescie
MOR	Wellington FC 33414 Rocio Brescia
	1980 Polo lake di El Wellington FL33414
No. of the Control of	

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

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.)

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)