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SECHLIARY OF STATE
TANASSEE, FLORIDA

TO: Registration Section Division of Corporations

Division of Corporations	SECTION
SUBJECT: J.L.C. Cleaning (Name of Limited Liability Company)	SECHLAH
(Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Jill Chambers (Name of Person)	
(Common of Controlly)	
J.L.C. Cleaning	
901 Cranberry Rd. Palm Bay FL, 32909	
(City/State and Zip Code)	-
For further information concerning this matter, please call:	

STREET ADDRESS:

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

(Area Code & Daytime Telephone Number)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: J.L.C. Claaning Hol. Co ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: **Principal Office Address:** Mailing Address: ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Jill Chambers 901 Cranberry Rd. Florida street address (P.O. Box NOT acceptable) Palm Bay FL 30909 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

(CONTINUED)

ARTICLE IV- Manager(s) or Managi The name and address of each Manager	or Managing Member is as follows:	מינה לון היים
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SECULTARY OF STATE TALLAHASSEE, FLORIDA
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•		
(Use attachment if necessary)		
NOTE: An additional article must be	added if an effective date is reque	sted.
(In accordance with section of this document constituent that the facts stated herein	or an authorized representative of a menton 608.408(3), Florida Statutes, the executites an affirmation under the penalties of penare true.) Chambers d or printed name of signee	on
3	Filing Fees: \$100.00 Filing Fee for Articles of Organi: \$ 25.00 Designation of Registered Agent	zation

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