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SECRETARY OF STATE,

T. SHANGER SEL 30 JULY.

COVER LETTER

TO: Registration Sec Division of Corp						
SUBJECT:	Jo's Cleani (Name of Limi	ng Services L	L.C			
The enclosed Articles of	Organization and fee(s) are	submitted for filing.				
Please return all correspo	ondence concerning this ma	tter to the following:				
JOSEF	H EDWARD	HRITZ	_			
		(Name of Person)			-	
	<u>-</u>	<u></u>	<u> </u>			
	_	(Firm/Company)				
10408	LARISSA ST	(Address)				
		Ç,				
UKLANDO	, FLORIDA (CI	ity/State and Zip Code)		—		-
For further information of	concerning this matter, please	ze call				
_						
JOSEPH H (Name	RITZ of Person)	at (<u>407)702-3</u> (Area Code & Daytime T	elephone Number)			
	r the following amount:			SECRE TALL AF	05 SEP	
\$125.00 Filing Fee	\$130,00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing F. Certificate of Status Certified Copy (additional copy is enclosed)	TARY OF STA	05 SEP 26 AM 7: 0	TILEU
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ms	ALE ALE	36	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

JOJO'S Cleaning Services L.L.C

(Must end with the words "Limited Liability Company," Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE I - Name:

The name of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
10408 Larissa St. ORLANDO FL, 32821	10408 LARISSA ST. ORLANDO FL 32821
(The Limited Liability Company cannot serve as its ov	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another
business entity with an active Florida registration.) The name and the Florida street address a	平 _S S
The name and the Florida street address of	平 _S S

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 (REQUIRED)

(CONTINUED)
Page 1 of 2

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

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

	Ũ		
Title:		Name and Address:	
"MGR" = Manag "MGRM" = Man			
- •	~55	Trans Town Ma	
MGR		JOSEPH EDWARD HRITZ	_
		10408 LARISSA ST. ORLANDO FL 32821	_
MGRM			_
MAKM		LISA SCHULTZ HRITZ	
		10408 LARISSA ST. ORLANDO FL 32821	******
			_
			
		The state of the s	_
		tree-Advention to Management and the second	
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			-
(Use attachment i	f necessary)		
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days after the da	ite of filing.)	pecine and cambot be more than five busines	s uays prior
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RECOIRED SIC	MATURE.		A-CRE
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			338 74
		r an authorized representative of a member.	- F
	(In accordance with section of this document constitute	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury	101 418
	that the facts stated here	in are true.)	and the
	JOSEPH E	. HRITZ	,
	Typed	or printed name of signee	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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