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## **COVER LETTER**

	Registration So Division of Co			
SUBJEC	T. 70P	Quality Peruriu	G 3 CLEANING d Liability Company)	LLC
The encl	osed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please re	turn all corresp	ondence concerning this matte	er to the following:	
1	LASHAW	NURA PATS		
			Name of Person)	
	TOP C	Quality PAINTU 235 Hopkin	VG 3 CLEANTA	UG LLC
		J	(Firm/Company)	,
		235 HOPKIN	S LANDING	Road
	,		(Åddress)	
_	<u>Or</u>	INCY FL 3236	/State and Zip Code)	
		J (City	Vistate and Lip Code)	
For furth	er information	concerning this matter, please	call:	
		, , , , , , , , , ,		•
Last	awndra	PAIS	at (860 ) 933	3-1953 OR 627-4134
	(Nam	e of Person)	(Area Code & Daytin	me Telephone Number)
Enclose	d is a check f	or the following amount:		
□ \$125.	00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee Certified Copy (additional copy is enclosed	Certificate of Status &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Ad Registration Section Division of Corpo Clifton Building 2661 Executive Co Tallahassee, FL 32	n rations enter Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
TOP Quality PATINTING 3 CLEANING LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited L	iability Company is:
Principal Office Address:  Mailing Address:	
235 HOPKIN'S Landing Road 235 Hopkin's Land Quincy FL 32351 Quincy FL 3235,	ding Road
ARTICLE III - Registered Agent, Registered Office, & Registered Agent (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an indibusiness entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	
Lashawndra PAIS	. •
Name	
Florida street address (P.O. Box NOT acceptable)	
Duincy PL FL 3235/	
City, State, and Zip	
Having been named as registered agent and to accept service of process for the liability company at the place designated in this certificate, I hereby accept t registered agent and agree to act in this capacity. I further agree to comply with statutes relating to the proper and complete performance of my duties, and I as the chief that the complete performance of my duties, and I as the chief that the chief	the appointment as Th the provisions of all The mandiar with and
accept the obligations of my position as registered agent as provided for in CALLANDING Registered Agent's Signature (REQUIRED)	Chapter of the control of the contro
(CONTINUED) Page 1 of 2	PM 4: 08  OF STATE E. FLORIDA

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	LASHAWAYDRA PATS 235 hopkins Landing R.d Duincy FL 32351
MGR	UZIEL PATS 235 Hopkins Landing Rid Duincy FL 32351
<u> </u>	
	·
(Use attachment if necessary)	
CLE V: Effective date, if other than the date effective date is listed, the date must be spondays after the date of filing.)	te of filing: 1-13-06 (OPTIONAL) pecific and cannot be more than five business days p
REQUIRED SIGNATURE:	
Signature of a member of	r an authorized representative of a member.
(In accordance with section	on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury

<u>. 2</u> .

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)

that the facts stated herein are true.)

AShawhara PAT Typed or printed name of signee