

(Requestor's Name) (Address) (Address)	600065664046
(City/State/Zip/Phone #)	02/13/0601031002 **130.00
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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Triple L Cleaning Services, LLC			
(Name of Lin	nited Liability Company)		
The enclosed Articles of Organization and fee(s) a	re submitted for filing.		
Please return all correspondence concerning this m	natter to the following:		
Melissia M. Black			
Triple L Cleaning Services, LLC			
The Colourning Colorose, 225	(Firm/Company)		*
6542 Tar Plant Road		<u> </u>	
	(Address)		
			0
Milton, FL 32570		<u> </u>	6 FE
(6	City/State and Zip Code)	ا استر استر	
For further information concerning this matter, ple	ace call:	ن. د.	06 FEB 13 PM 1:25
ror tarner institution concerning this matter, pre	asc can.	· •	19 3 Y
Kathryn Lewis	ai (850) 982-7527	•	755 155 155 155 155 155 155 155 155 155
(Name of Person)	(Area Code & Daytime To	elephone Number)	景が
Enclosed is a check for the following amount:			
☐ \$125,00 Filing Fee	& ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fe Certificate of Status & Certified Copy (additional copy is enclose	&

STREET ADDRESS:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N	ame:	
The name of the	Limited Liability C	ompany is:
Triple L Cleaning	Services, LLC	
ARTICLE II - A	A ddyneer	
		ess of the principal office of the Limited Liability Company is:
The maning aud	iess and succi addit	ess of the principal office of the Linned Elability Company is:
Principal Office	: Address:	Mailing Address:
6542 Tar Plant Ro	pad	6542 Tar Plant Road
Milton, FL 32570)	Milton, FL 32570
		<u> </u>
ARTICLE III -	Registered Agent,	Registered Office, & Registered Agent's Signature:
The name and th	e Florida street add	ress of the registered agent are:
	Kathryn Lewis	
		Name Same
	6542 Tar Plant Re	oad
	Flo	orida street address (P.O. Box NOT acceptable)
	Milton	FL 32570
		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.

(CONTINUED)

Registered Agent's Signature

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:

The name and address of each ividiager	or Managing Member is as follows.
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Melissia M. Black
	6542 Tar Plant Road
	Milton, FL 32570
MGRM	Christol L. Hurst
	6542 Tar Plant Road
	Milton, FL 32570
	OB FEB 18 PA 1: CO
(Use attachment if necessary)	Du.
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Mulias Signature of a member of	or an authorized representative of a member.
(In accordance with section	on 608 408(2). Florida Statutor, the evecution

(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.)

Melissia M. Black

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)