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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**a & m cleaning services llc**

Certificate of Status	0
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DIVISION OF CORPORATION

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION  
OF  
A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I-NAME

The name of the Limited Liability Company is:

A & M CLEANING SERVICES LLC

ARTICLE II-ADDRESS:

The mailing address and street address of the principle office of the Limited Liability Company is:

PRINCIPAL OFFICE ADDRESS:

2967 LYNDSCAPE ST  
ORLANDO FL 32833

MAILING ADDRESS:

2967 LYNDSCAPE ST  
ORLANDO FL 32833

ARTICLE III- REGISTERED AGENT, REGISTERED OFFICE, REGISTERED AGENT'S SIGNATURE

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

ADRYANNA HERMOSO  
(NAME)

2967 LYNDSCAPE ST  
FLORIDA STREET ADDRESS (P.O BOX NOT ACCEPTABLE)

ORLANDO FL 32833  
CITY, STATE, AND ZIP

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS 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 SIGNATURE

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**ARTICLE IV-MANAGEMENT/MEMBER(S):**

The name(s) and address (es) of each Manager or Managing Member is as follows:

Title:

Name and address:

MGR= Manager

MGRM= Managing Member

MGRM= ADRYANNA HERMOSO, 2967 LYNDSCAPE ST, ORLANDO FL 32833

MGRM= MARTHA RODRIGUEZ, 2967 LYNDSCAPE ST. ORLANDO FL 32833

(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.)

**ADRYANNA HERMOSO**

Typed or printed name of signed

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