

LO6000064817

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

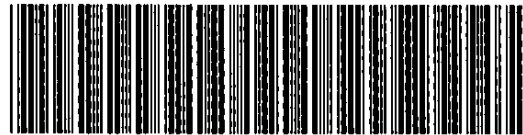
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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06 JUN 27 AM 11:07  
DEPARTMENT OF STATE  
DIVISION OF REGISTRATIONS  
TALLAHASSEE, FLORIDA

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2006 JUN 27 PM 1:33  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# LAZARUS

## CORPORATE FILING SERVICE

3320 SW 87<sup>TH</sup> AVENUE

MIAMI, FL 33165

305-552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. OLYMPIA CLEANING SERVICES, L  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2.00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

### NEW FILINGS

- ☐ Profit
- ☒ Not for Profit
- ☒ Limited Liability
- ☐ Domestication
- ☐ Other

### OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

### AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

### REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

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SECRETARY OF STATE

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Olympia Cleaning Services, L.L.C

**ARTICLE II - Address:**

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

9009 SW 214th - MIAMI, FL 33189

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature**

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

Carolle M St-Hubert  
Name

9009 SW 214th  
Florida street address (P.O. Box NOT acceptable)

MIAMI FL 33189  
City, State, and Zip

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*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.*

Carolle M St-Hubert  
Registered Agent's Signature

**Article IV - Management (Check box if applicable.)**

- ☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

Carolle M. St-Hubert  
MANAGER, MEMBER

Carolle M St-Hubert  
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.)

Carolle M St-Hubert