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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

A Division of Co					
SURJECT. Excelle	ence in Service LLC				
		ed Liability Company)		_	
The enclosed Articles o	f Organization and fee(s) are s	submitted for filing.			
Please return all corresp	ondence concerning this matte	er to the following:			
Svetlana C	hernyshova				
	((Name of Person)			
Excellence	in Service. LLC				
-		(Firm/Company)			
800 Logar	n Blvd, S			2006 DEC -4	DIVISION OF
		(Address)		E	DX 0
Naples, Fl	. 34119				FCCS
	(City	/State and Zip Code)		3	300
For further information	concerning this matter, please	call·		2: 24	CORPORATIONS
	, p	V		,	· n
Svetlana Chernys		at (239) 353-120	·····	_	
(Name	of Person)	(Area Code & Daytime To	elephone Number)		
Enclosed is a check fo	or the following amount:				
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of Sta Certified Copy (additional copy is en	tus &	
	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	ns		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:	
Excellence in Service, LLC		
(Must end with the words "Limited Liability Company, "L	imited Company" or their abbreviation "LLC," or	r "L.C.,")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liab	ility Company is:
Principal Office Address:	Mailing Address:	
800 Logan Blvd, S	800 Logan Blvd, S	
Naples, Ft. 34119	Naples, Fl. 34119	
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.) The name and the Florida street address of the street address of the street address.	tegistered Agent. You must designate an individua	SECRETAR DIVISION OF C
Tatyana Chernysheva	ame	E SEE
		ا مسائد،
800 Logan Blvd, S Florida street	t address (P.O. Box NOT acceptable)	LED Y OF STATE CORPORATION: PH 2: 24
Naples, Fl. 34119 FL		?;
City, Sta	ate, and Zip	₹ NS
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this capa statutes relating to the proper and complete accept the obligations of my position as re	in this certificate, I hereby accept the a acity. I further agree to comply with the e performance of my duties, and I am fo egistered agent as provided for in Cha	appointment as e provisions of all amiliar with and

(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:

MGR	Svetlana Chernyshova
MGRM	Tatyana Chernysheva
	PH 2: 24
	2: 24
(Use attachment if necessar	
TO MA TOPPOSATION AND SPECIAL	er than the date of filing: (OPTIONA
fective date is listed, the da	ate must be specific and cannot be more than five business da
fective date is listed, the da	ate must be specific and cannot be more than five business da
LE V: Effective date, if oth fective date is listed, the date days after the date of filing REQUIRED SIGNATUR	ate must be specific and cannot be more than five business da g.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

Svetlana Chernyshova

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee