

LO7000006544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

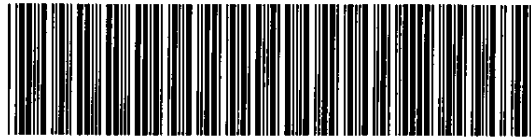
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6007-304*

07 JAN -2 PM 2:39

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 3, 2007

LISA R PAPE
18942 MCGRATH CIR
PORT CHARLOTTE, FL 33948

SUBJECT: YOU'VE GOT IT MAID L.L.C.
Ref. Number: W07000000304

We have received your document for YOU'VE GOT IT MAID L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Document may contain only one registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6851.

Gina McLeod
Document Specialist

Letter Number: 307A00000372

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: You've Got It Maid L.L.C
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa R. Pape and Susan Gallio
(Name of Person)

You've Got It Maid L.L.C
(Firm/Company)

18942 McGrath Circle
(Address)

Port Charlotte, Florida 33948
(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa R. Pape at (941) 258-2438
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|---|---|

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

You've Got It Maid L.L.C

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

18942 McGrath Circle

Port Charlotte, Florida 33948

Mailing Address:

18942 McGrath Circle

Port Charlotte, Florida 33948

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Lisa R. Pape

Name

18942 McGrath Circle

Florida street address (P.O. Box **NOT** acceptable)

Port Charlotte

FL 33948

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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Lisa R. Pape

18942 McGrath Circle

Port Charlotte, Florida 33948

MGRM

Susan Gallio

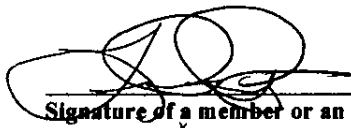
837 Dobell Terrace

Port Charlotte, Florida 33948

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: January 1, 2007 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Lisa R. Pape

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)