## ES00030023

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		,
		i
<u> </u>		

Office Use Only



700120924777

03/24/08--01008--020 \*\*125.00

08 MAR 24 PH 3: 4

SECRETARY OF STATE
DIVISION OF CORFERATION

G. MCLEOD

MAR 2 5 2008

**EXAMINER** 

## COVER LETTER ,,

	egistration S ivision of Co			•
SUBJECT	`:	FIRST CLASS (Name of Limit	CLANING-BY DER	SBIE
The enclos	ed Articles o	f Organization and fee(s) are	submitted for filing.	
Please retu	ırn all corresi	oondence concerning this mat	ter to the following:	
		DEBBIG	(Name of Person)	
<u></u>		FIRST	LASS CLETWING B	Y DERBIE
<del></del>	-19-	1020	(Address)	
		CLERMO	(Address)  Af PL 34711  (Address)	·
For further	r information	concerning this matter, pleas		
	Debb re	e of Person)	at ( 407 ) 319 - O	OG   phone Number)
Enclosed	is a check f	or the following amount:		
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$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 C Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:			
FIRST CLASS CLEANING (Must end with the words "Limited Liabil	BY DEBBIE LLC		
(Must end with the words   Limited Liabili	ny Company, E.E.C., or EEC.		
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Comp	any is:	
Principal Office Address:	Mailing Address:		
1020 EVEREST ST CLERMONT, FL 34711	CLERMONT, FL 34711		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	ered Agent. You must designate an individual or another	DIVISION O	SECR
The name and the Florida street address of the r	egistered agent are:	<del>2</del> 5	- <u>   </u>
DEBBIE S Name	HARE	OF CC 24	(学)
Name			$\Box$
1020 EVER	FST ST	မှ ၂၈	
Florida street add	lress (P.O. Box <u>NOT</u> acceptable)	<b>61</b>	};
CLERMON	T <sub>FL</sub> 34711 and Zip	- 140,	:
City, State, a	and Zip		
		ال معادية	

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 (REOURED

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
SHE MGR	Debbie Share 1020 Everest ST
	Clermont FL 34711
(Use attachment if necessary)	
LE V: Effective date, if other than the	he date of filing: (OPTIO) t be specific and cannot be more than five business of
days after the date of filing.)  REQUIRED SIGNATURE:	be or an authorized representative of a member.
days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a mem  (In accordance with	section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury of herein are true.

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)