

L090000013521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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Effective Date 01/01/09

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 JAN - 8 AM 8:34

W08-57027
J. BRYAN JAN - 9 2009

J. BRYAN

FEB 11 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2009

DORIS LARGEL
3616 N. 53RD ST.
TAMPA, FL 33619

SUBJECT: VILLA'S CLEANING SERVICES, LLC
Ref. Number: W08000057027

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DIVISION OF CORPORATIONS
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You failed to make the correction(s) requested in our previous letter.

Forms not complete, still not sure what you are wanting to do.

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) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 309A00000864



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 26, 2009

DORIS LARGEL
3616 N. 53RD ST.
TAMPA, FL 33619

SUBJECT: VILLA'S CLEANING SERVICES, LLC
Ref. Number: W08000057027

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
09 JAN -8 AM 8:34

You failed to make the correction(s) requested in our previous letter.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 909A00002739

COVER LETTER

TO: Registration Section
Division of Corporations

RECEIVED
2009 FEB -5 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: VILLA'S CLEANING SERVICES
(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:

DORIS LARGEL

(Name of Person)

upm Largel

(Firm/Company)

3616 N. 53rd St.

(Address)

TAMPA FL. 33619

(City/State and Zip Code)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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For further information concerning this matter, please call:

DORIS LARGEL

(Name of Person)

at (813) 300-5864

(Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

check has been
sent in previous letter

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

Ref. number
Letter number
W08000057027

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Villa's Cleaning Services, LLC.

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

ARTICLE II - Address:

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

Principal Office Address:

3616 N. 53rd St
Tampa FL 33619

Mailing Address:

Same

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:

Effective Date 01/01/09

DORIS LARGE
Name

3616 N. 53rd St

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

Tampa FL 33619

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.

Doris Large
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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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:

MGRM

DORIS LAGEL
3616 N 53RD ST
TAMPA FL 33619

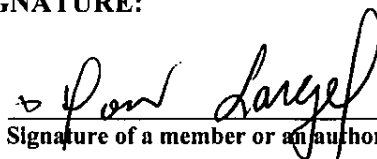
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1/1/09 (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.)

DORIS LAGEL
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)