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(Requestor's Name)			
(Address)			
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· (City/State/Zip/Phone #)			
· PICK-UP WAIT MAIL			
(Business Entity Name)			
. (Business Entity Name)			
<u> </u>			
(Document Number)			
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S. HAWKES

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EXAMINER

S. HAWKES

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EXAMINER

LUCA 4975



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 18, 2009

JOHNNIE MAE BROWN 3826 ROSWELL DRIVE TALLAHASSEE, FL 32310

SUBJECT: JMB CLEANING SERVICES, LLC

Ref. Number: W09000041975

We have received your document for JMB CLEANING SERVICES, LLC and your check(s) totaling \$175.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6955.

Letter Number: 209A00030761

Suzanne Hawkes Regulatory Specialist II

COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJE	SUBJECT: Services Name of Limited Diability Company				
The enc	losed Articles of Organization and fee(s) are submitted for filing.				
Please r	eturn all correspondence concerning this matter to the following:				
-	Johnsie Mae Brown Name of Person				
-	5m3 Cleaning Services, U.C.				
3826 Roswell Drive					
-	City/State and Zip Code Srown foxy enbarame! E-mail address: (to be used for future affinual report notification)				
For furt	her information concerning this matter, please call:				
	Name of Person at (850) 234-0808 Area Code & Daytime Telephone Number				
Enclose	ed is a check for the following amount:				
[] \$125.0	Of Filing Fee \$\bigcup \\$130.00 \text{ Filing Fee & }\bigcup \\$155.00 \text{ Filing Fee & }\bigcup \\$160.00 \text{ Filing Fee, }\bigcup \text{Certified Copy }\bigcup \text{(additional copy is enclosed)} \text{Certified Copy }\bigcup \text{(additional copy is enclosed)}				
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:				
(Must end with the words "Limited Liabili	ty Company," "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:			
3826 Roswell Dr	3826 Roswell Dr TEU, Fl 32310			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration)				

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

Name

Name

Name

Name

Note

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

Tall, fl 543 18

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)

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
mg R	Johnnie Mar Brown 3874 Zoswell Drive Tall. Fl 34310			
	29 mll:08			
(Use attachment if necessary)				
ARTICLE V: Effective date, if other than the date of filing: (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.				
of this document constitut that the facts stated herein	are true.) Or printed name of signee			
Filing Fees:	or printed manua or organic			

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)