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D. BRUCE

NOV 13 2009

EXAMINER

COVER LETTER

Division of C	orporations			
SUBJECT:	PLUTO SERVICES, LLC			
		ed Liability Company		
The enclosed Articles	of Organization and fee(s) are	submitted for filing.		
Please return all corres	pondence concerning this mat	ter to the following:		
	Ca	rlos Fernandez		
		Name of Person		
	PLUTO	O SERVICES, LLC		
		Firm/Company		
	3581 S.W. 117	TH AVENUE, APT.# 5404		
		Address		
	MIAM	I, FLORIDA 33175	TALL	9
	Cit	y/State and Zip Code	RETA AHAS	31 AON 60
	E-mail address: (to be used	for future annual report notification)	SHY TH	
For further information	concerning this matter, please	e call:	FLO	AM H: 31
Carlos Fernandez Name of Person			52-7357 景点	34
Name	of reison	Area Code & Daytime Teler	onone Number	
Enclosed is a check i	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 Fe Certificate of Stat Certified Copy (additional copy is er	us &
	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	ircle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

DI LITO SERVIO	ES LIC			
PLUTO 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 pri	ncipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
PLUTO SERVICES, LLC 3581 S.W. 117TH AVENUE, APT.# 5404 MIAMI, FL 33175	PLUTO SERVICES, LLC 3581 S.W.117TH AVENUE, APT. #5404 MIAMI, FL 33175			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)				
The name and the Florida street address of the registered agent are:				
MERCEDES I	MERCEDES INFANTE ≥5 ≥			
Name	HASS TA			
3581 S.W. 117TH AVE	NUE. APT.# 5404			
Florida street address (P.O. Box NOT acceptable)				
MIAMI	Box NOT acceptable) FL 33175 RA			
City, State, and				
liability company at the place designated in th registered agent and agree to act in this capacity.	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance 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.. Mercedes Infance
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	Name and Address:
"MGRM" = Managing Me	ember
MGR	CARLOS FERNANDEŽ
	3581 S.W. 117TH AVENUE, APT.# 5404
	MIAMI, FL 33175
	
(Use attachment if necessa	ry)
ARTICLE V: Effective date, if oth	ner than the date of filing: N/A (OPTIONAL)
(If an effective date is listed, the d to or 90 days after the date of filin	ate must be specific and cannot be more than five business days prior
REQUIRED SIGNATUR	RE:
	(\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Signature	of a member or an authorized representative of a member. ance with section 608.408(3), Florida Statutes, the execution cument constitutes an affirmation under the penalties of periory.
of this do	ance with section 608.408(3), Florida Statutes, the execution cument constitutes an affirmation under the penalties of perjury costs stated herein are true.)
	CARLOS FERNANDEZ
Filing Fees:	Typed or printed name of signee
THIE LEGS!	

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

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