209000111824

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
·	
(Document Number)	
Certified Copies Certificates of Status :::	
Columbia sopies	
Special Instructions to Filing Officer:	
	ļ





400162684494

.11/19/09--01015--010 **125.00

2009 NOV 19 PH 1: 43

M. THOMAS

NOV 2 0 2009

EXAMINER

COVER LETTER

TO: Registration of Division of	on Section f Corporations		
SUBJECT:	VANIA JANITO	ORIAL SERVICES, I	_LC
	Name of Limited L		
The enclosed Article	es of Organization and fee(s) are sub	nitted for filing.	
Please return all cor	respondence concerning this matter to	the following:	
	· · · · · · · · · · · · · · · · · · ·	'ANIA SOSA	
	Nar	me of Person	
		RIAL SERVICES, LLC	
	Fin	m/Company	TALL TALL
	600 N.E. 1	62ND STREET	2009 NOV 19 PH 1: 43 SECRETARY OF STATE TALLAHASSEE, FLORID
		Address	19 ASS
	MIAM	II, FL 33162	E PR
	·	ate and Zip Code	I: h
	E-mail address: (to be used for fi	10@yahoo.com uture annual report notification)	<u> </u>
For further informat	ion concerning this matter, please cal	1:	
	A VANIA SOSA at ume of Person	(phone Number
Enclosed is a chec	k for the following amount:		
∑\$ 125.00 Filing Fe	ce \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$155.00 Filing Fee & 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:	
VANIA JANITORIAL S (Must end with the words "Limited Liabil	
(Must end with the words Limited Liabil	ny Company, L.L.C., or LLC.
ARTICLE II - Address:	Ę
The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
VANIA JANITORIAL SERVICES, LLC 600 N.E. 162ND STREET MIAMI, FL 33162	VANIA JANITORIAL SERVICES TIC 2 600 N.E. 162ND STREET MIAMI, FL 33162
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature:
The name and the Florida street address of the r	egistered agent are:
VANESSA R	RICARDO
Name	
600 N.E. 162N	D STREET
Florida street address (P.O.	
MIAMI	FL 3314Z
City, State, an	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

(CONTINUED)

VANESSA RICARDO
Registered Agent's Signature (REQUIRED)

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:

	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	ANA VANIA SOSA
	600 N.E. 162ND STREET
	MIAMI, FL 33162
MGRM	VANESSA RICARDO
· · · · · · · · · · · · · · · · · · ·	600 N.E. 162ND STREET
·	MIAMI, FL 33162
	2009 NOV 19 TALLIAHASS
	子而又
	19 See 19
	- Fig. 2
(Use attachment if necessary)	
vose anacimient ii liecessalvi	
(Ose attachment if ficeessary)	
LE V: Effective date, if other than the	
CLE V: Effective date, if other than the ffective date is listed, the date must be	e date of filing: N/A (OPTIONAL) ne specific and cannot be more than five business days prior
CLE V: Effective date, if other than the ffective date is listed, the date must be	. (3: 110: 112)
CLE V: Effective date, if other than the ffective date is listed, the date must be	. (3: 110: 112)
LE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)	. (3: 110: 112)
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	pe specific and cannot be more than five business days prio
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with se	pe specific and cannot be more than five business days prior the specific and cannot be more than five business days prior t
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document cons	pe specific and cannot be more than five business days prior the specific and cannot be more than five business days prior t
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document consthat the facts stated he	er or an authorized representative of a member. Section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)