

L10000019171

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
(Boodificity Mariber)		
Cartification of Status		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



900163749039

02/18/10--01024--008 **125.00

PILED

10 FEB 18 PM 2: 12

SEPARTANE OF STATE

N. O- FEB 1 9 2010



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:		Cleaning Co. of North F	lorida
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
		1ary K. Stewart	
		Name of Person	
	Green Leaf C	leaning Co. of North Florid	а
		Firm/Company	
	252	2 College Street	
		Address	
	Jacks	sonville, FL 32204	
		ity/State and Zip Code	
	MaryStev	wart1011@comcast.net	
	E-mail address: (to be used	for future annual report notification)	
For further information	n concerning this matter, pleas	se call:	
Ma	ry Stewart		53-2342
Namo	e of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check t	for the following amount:		
	\$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)
	Mailing Address Pagistration Section	Street/Courier Address Pagistration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liab	onity Company is:	
	Cleaning Co. of North Florida, le words "Limited Liability Company," "L.L.C.," of	
(Must end with the	le words "Limited Liability Company," "L.L.C.," o	r "LLC.")
ARTICLE II - Address:		
The mailing address and stree	et address of the principal office of the	Limited Liability Company is:
Principal Office Address:	Mailing Address	<u> </u>
2522 College Street Jacksonville, FL 32204	2522 College St Jacksonville, FL	
ARTICLE III - Registered A (The Limited Liability Company cannot business entity with an active Florida i	Agent, Registered Office, & Register of serve as its own Registered Agent. You must des registration.)	ignate an individual or another
The name and the Florida stre	eet address of the registered agent are:	B PH SSEE, SSEE,
	Mary Stewart	
	Name	2: 12 STATE FLORID
*******************************	1737 Southcreek Drive	DA:
Florid	da street address (P.O. Box NOT acceptable)	
Jacksor	nville, FL 32259 _{FL}	
• • • • • • • • • • • • • • • • • • • •	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)

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Mo	noer	
MGRM	Mary K. Stewart	
	1737 Southcreek Drive	
	Jacksonville, FL 32259	
MGRM	Laura J. Young	
	224 S. Elmwood Street	
	Rossville, GA 32259	
(Use attachment if necessary	v)	
`	•	
RTICLE V: Effective date, if of	er than the date of filing: (OPTIONAL)	•
is an effective date is listed, the d o or 90 days after the date of filir	te must be specific and cannot be more than five business days pr	10
·		
<u>REQUIRED</u> SIGNATUI	E:	
**	Mou Staront E = =	
Signature	of a member of an authorized representative of a member.	
(In accord	of a member of an authorized representative of a member.	
of this do	cument constitutes an affirmation under the penalties of perjury	
that the ta	5E 2	
	Mary Stewart Typed or printed name of signee	
Filing Fees:	V1 1	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)