# 1100000004387

(Requestor's Name)		
(Address)		
(Address)		
(City	//State/Zip/Phone	<del>-</del> #)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
·		
W100000	a7875	$\tilde{0}$

Office Use Only



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06/09/10--01014--008 \*\*160.00

FILED

10 JUN 15 PM 3:57

D. BRUCE
JUN 16 2010
EXAMINER



### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 10, 2010

RAMON A. DURAN 31307 GLENDALOUGH WAY WESLEY CHAPEL, FL 33545

SUBJECT: ALPHO & OMEGA CARPET CLEANING LTD.LCO.

Ref. Number: W10000027875

We have received your document for ALPHO & OMEGA CARPET CLEANING LTD.LCO. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." Please amend your document accordingly.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 510A00014381

#### **COVER LETTER**

TO: Registration of Division of	on Section Corporations			
SUBJECT: A	Pho L Omego (a Name of Limit	rpet Claning ed Liability Company	LTd.Co.	
The enclosed Article	es of Organization and fee(s) are	submitted for filing.		
Please return all corr	respondence concerning this mat	ter to the following:		
Ram	on A. DURAN			
Alpho	of Omega Carpe	Name of Person  Firm/Company  LTd	ilco	
3130	o7 Glendaloug	h Way	10 14.	
Uksle	y Chapel, Fla	Address  7  33545  y/State and Zip Code	JUN 15 F	
duran ramon 656 YAhovi Com				
	E-mail address: (to be used f	or future annual report notification)	ATE	
For further information concerning this matter, please call:				
Ramon A. DURHO at (8/3) 295-3522  Name of Person Area Code & Daytime Telephone Number				
Enclosed is a check	for the following amount:			
<b>⊒\$</b> 125.00 Filing Fe	e \$130.00 Filing Fee & Certificate of Status	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	:
Alpho & Omega Carpet Ca	eaning LTd. Liability Co. ility Company, "L.L.C.," or "LLC.")
(Must and with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the p	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
31307 Glendalough Why Wesley Chapel, Fil. 33545	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Regibusiness entity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
Ramon A. Dur	2AN SET 5
31307 Clendalou	Idress (P.O. Box NOT acceptable)
i fortua street ac	Miless (1.0. Don More more)

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..

Wesley Chapel FL 33545
City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

## The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) . (OPTIONAL) **ARTICLE V:** Effective date, if other than the date of filing: \_\_\_ (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

Filing Fees:

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

that the facts stated herein are true.)

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

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

Page 2 of 2

of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee



June 10, 2010

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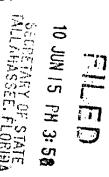
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Deborah Bruce Regulatory Specialist II

Letter Number: 510A00014381



www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314