# U000065208

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T. CLINE JUN 18 2010 **EXAMINER** 

# COVER LETTER

Division of Co			
SUBJECT: B	Name of Limit	oral and Daint	ing Service
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspondent	ondence concerning this mat	ter to the following:	
IRA	- John So		
Brj	Janitora	Name of Person  - Land Daintin  Firm/Company	g Service
2200	7 Keith S	Address	
Talla	hassee f	/ 3530/ y/State and Zip Code	
	E-mail address: (to be used	for future annual report notification)	
For further information c	oncerning this matter, please	e call:	
X Una Jo Name o	f Person	at (850) 544	- 1951 phone Number
Enclosed is a check for	the following amount:		Au
☑\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 biling Fee. Certificate of States & Certified Capy (additional food is employed)
	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	<b>P</b>

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

B+ J Janitorial and Dainting Service L.L.C. (Must end with the words "Limited Liability Company, "L.L.C." or "LLC.")

### **ARTICLE II - Address:**

**Principal Office Address:** 

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an indivibusiness entity with an active Florida registration.)	dual or anoth	ier	
The name and the Florida street address of the registered agent are:  IRA John Son Jr.  Name  2209 Keith St.  Florida street address (P.O. Box NOT acceptable)  Tallahossee FL 32301  City, State, and Zip	CRETARY OF STA LAHASSEE, FLOR	10 JUN 18 PM 1:39	TILED

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

The name and address of each Manag	ger or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	IRA Johnson 2269 Keith Sti Tallahassee 71. 32301
·	
(Use attachment if necessary)	
n effective date is listed, the date must be 90 days after the date of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prio
REQUIRED SIGNATURE:	
X Signature of a grambe	r or an authorized representative of a member.
of this document consti that the facts stated her	, · · · · · · · · · · · · · · · · · · ·
Tyl	Dohn Son ped or printed name of signee  ASS SS S
Filing Fees: \$125.00 Filing Fee for Articles of Organ	nization and Designation
of Registered Agent	المناسب المنت المناسب
\$ 30.00 Certified Copy (Optional)	nization and Designation

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