

00 08:13a

A1a Incorporation

13056752811

p.1

L1000001d6784

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000145519 3)))



H100001455193ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CSH SERVICES, LLC
Account Number : I2C070300160
Phone : (850) 494-3124
Fax Number : (561) 455-9885

L. SELLERS

JUN 28 2010

EXAMINER

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
Ultimate Professional Services of South Florida, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

RECEIVED

10 JUN 22 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUN 22 AM 8:56

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

4-10000145519-3

**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

ULTIMATE PROFESSIONAL SERVICES OF SOUTH FLORIDA, LLC

ARTICLE II ADDRESS

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

830 SW 1ST AVENUE
POMPANO BEACH, FLORIDA 33060**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent are:

TIMOTHY W GARDNER
1581 NE 47TH STREET
OAKLAND PARK, FLORIDA 33334

Having been named as registered agent 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.

x



TIMOTHY W GARDNER, Registered Agent's signature

CLERK OF STATE
TALLAHASSEE, FLORIDA

JUN 22 AM 8:56

FILED

4-10000145519-3

4.10000145519.3

PAGE 2 ULTIMATE PROFESSIONAL SERVICES OF SOUTH FLORIDA, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER

RICKY LEE DYKSTRA

830 SW 1ST AVENUE

POMPANO BEACH, FLORIDA 33060

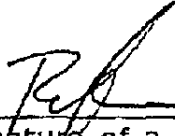
MANAGING MEMBER

TIMOTHY W GARDNER

1581 NE 47TH STREET

OAKLAND PARK, FLORIDA 33334

.....
X


Signature of a member or an authorized representative of a member
(In accordance with section 608.408(3), Florida Statutes, the
execution of this document constitutes an affirmation under the
penalties of perjury that the facts stated herein are true.

RICKY LEE DYKSTRA

4.10000145519.3.