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Special Instructions to F	-iling Officer:	

Office Use Only



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D. BRUCE
AUG 0 \$\frac{7}{2} 2010

EXAMINER

## **COVER LETTER**

Division of C				
SUBJECT: 6	enes;540 Name of Limi	1 Cleaning Setted Liability Company	ervice LLC	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	arla E. H			_
		Firm/Company		- <del>-</del>
150	Willow L	Vick Drive		_
Talla	hassee, Fla	Orida 3230 ty/State and Zip Code	8	 -
_ (gen	E-mail address: (to be used	for future annual report notification)	· · · · · · · · · · · · · · · · · · ·	
	concerning this matter, pleas			
Carla E.		at ( <u><b>850</b></u> ) <u><b>339</b> – Area Code &amp; Daytime Telep</u>	3025 phone Number 75	
Enclosed is a check f	or the following amount:		AH	**************************************
□\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Fifting Feet Certificate or Status & Certified Copy (additional pony is englased	
	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	ircle	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:
Genesis 4 U Cleaning Service L.LC.  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
1501 Willow Wick Dr. 1501 Willow Wick Drive Tallahassee, Florida 32308  ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are:  Carla E. Hall  Name  1501 Willow Wick Orive  Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable)  Tallahassee FL 32308  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)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Memb	Name and Address:
MGRM	Carla E. Hall 1501 Willow Wick Drive Tallahassee, FL 32308
MGRM	Murie Sweet 560 Teal lane
MGRM	Yalencia Shirate 560 Teal Lane Tallahassee, FL 32308
,	
(Use attachment if necessary) <b>LE V:</b> Effective date, if other t	han the date of filing:
	must be specific and cannot be more than five business da
	in the second
REQUIRED SIGNATURE:	CAHA!
REQUIRED SIGNATURE:	CAHASSEI
REQUIRED SIGNATURE:	member or an authorized representative of a member.

\$125,00 Filing Fee for Articles of Organization and Designation

Filing Fees:

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