

#

Division of Corporations

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.

((H11000063008 3)))



H110000630083ABCT

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 : LEGALZOOM.COM INC.
Account Number : 120010000062
Phone : (323) 962-8600
Fax Number : (323) 962-3889

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.
InterServ, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED

11 MAR 10 AM 7:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER

MAR 11 2011

Electronic Filing Menu

Corporate Filing Menu

Help

INTERSERV, INC
605 YOUNGSTOWN PARKWAY
ALTAMONTE SPRINGS, FL 32714
407-310-8048

February 11, 2011

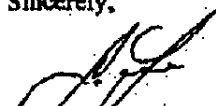
To whom it may concern:

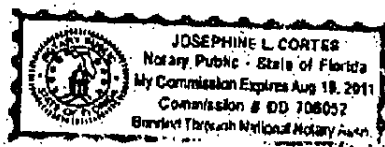
This is to inform you that I, Katerina Zrustova, have dissolved Interserv, Inc and I will not be reinstating the old business.

If you have any further questions, please feel free to give me a call at 407-310-8048.

Thank you for your help with this matter.

Sincerely,


Katerina Zrustova



STATE OF FLORIDA
COUNTY OF SEMINOLE

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME
THIS Feb 11, 2011 BY Katerina Zrustova
WHO IS PERSONALLY KNOWN TO ME OR PRODUCED POA DL
2623-500-78 AS IDENTIFICATION.

NOTARY PUBLIC: Josephine L. Cortes

H11000063008 3

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: InterServ, LLC

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sheila Dang

(Name of Person)

Legalzoom.com, Inc.

(Firm/Company)

100 W. Broadway, Suite 100

(Address)

Glendale, CA 91210

(City/State and Zip Code)

For further information concerning this matter, please call:

Ben Mektrakulchai

(Name of Person)

at (323) 962-8600 ext. 7625

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$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

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 Circle
Tallahassee, FL 32301

H11000063008 3

H11000063008 3

FILED
11 MAR 10 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

InterServ, LLC

(Must end with the words "Limited Liability Company," "LLC," 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:**605 Youngstown ParkwaySuite 38Altamonte Springs, FL 32714**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:

Katerina Zrustova

Name

605 Youngstown ParkwayFlorida street address (P.O. Box **NOT** acceptable)Altamonte Springs, FL 32714

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 Katerina Zrustova

(CONTINUED)

Page 1 of 2

Tracking#

H11000063008 3

From:

H11000063008 3

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

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

Title:**Name and Address:**

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Katerina Zrustova

605 Youngstown Parkway, Suite 38

Altamonte Springs, FL 32714

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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 of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Sheila Dang, Legalzoom.com, Inc.

Typed or printed name of signer

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