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## FLORIDA LIMITED LIABILITY CO. RONNYMASS HEALTH CLEANING LLC

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ALLAHASSEE, FLORIDA

B. BOSTICK
JUN - 8 2011

*EXAMINER* 6/7/2011

## ARTLICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I- Name:** 

The name of the Limited Liability Company is:

## RONNYMASS HEALTH CLEANING LLC

Article II-Address:

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

Principal Office Adress:

Mailing Address:

2970 SW 38TH CT APT #8, MIAMI FL, 33134

SAME

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:

RONNY GALLEGO PEREZ 2970 SW 38<sup>TH</sup> CT APT #8, MIAMI FL, 33134

Having been named as registered agent and to accept services 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 statues 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)

(continue)

A STATE OF THE STA

ARTICLE IV-Manager(s) or Managing	Member(s)		
The name and address of each Mana	ger or managing Member is as	follow:	
TITLE:	Name and Address		
MGR= Manager MGRM= Managing Member		, .	•
MGR	RONNY GALLEGO PER	REZ,	
	2970 SW 38 <sup>™</sup> CT # 8		
	MIAMI, FL 33134	11 JUN -7 AM 7: 13 SECRETARES OF STATE TALLAHASSEE, FLORIDA	The state of the s
ARTICLE V: Effective date, if other	ner than the date of filing, JUN	E 06TH, 2011.	
(The effective date:1) cannot be price filed by the Florida Department if Statistical in the attached Certificate of Control REQUIRED SIGNATURE:	ate; AND 2) must be the same as th	e effective date	
SIGNATURE OF THE MEMBER OR AN	AUTHORIZED REPRESENTATIVE O	F A MEMBER.	
(In accordance with section 608.408) constitutes an affirmation under the herein are true.)			

\_ Type or printer name of signee.

RONNY GALLEGO PEREZ