

L11000077663

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(City/State/Zip/Phone #)

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07/05/11--01011--004 **130.00

Effective Date

7/1/11

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JUL -5 PM 12:17

T. HAMPTON

JUL - 4 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SMR Cleaning Services 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:

Scott Hudson

Name of Person

SMR Cleaning Services LLC

Firm/Company

20103 Natures Hike Way

Address

Tampa, Florida 33647

City/State and Zip Code

Shuds9@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Scott HUDson

Name of Person

at (727

Area Code

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)

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

Effective Date

7/1/11

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SMR Cleaning Services LLC.

(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:

20103 Natures Hike Way
Tampa, Florida 33647

Mailing Address:

PO Box 47796
Tampa Florida 33646

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate the limited liability company or another business entity with an active Florida registration.)

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

Scott Hudson

Name

20103 Natures Hike

Florida street address (P.O. Box)

Tampa

FL

33647

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 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 shall not resign until I accept the obligations of my position as registered agent as provided for by the laws of the State of Florida.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Scott Hudson

20103 Natures Hike way

Tampa, Florida 33647

MGR

Toni Hudson

20103 Natures Hike way

Tampa, Florida 33647

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 07/11/11 (OPTIONAL)
(If an effective date is listed, the date must be specific and within five business days to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative

(In accordance with section 608.408(3), Florida Statutes, the executive officer of the corporation constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of Banking and Finance constitutes a third degree felony as provided for in s.817.155, F.S.)

Scott HUDSON

Typed or printed name of signee

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)

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