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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

EFFECTIVE DATE 02/17/12



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02/20/12--01050--003 **160.00

TILED

12 FEB 20 M R 00

SECRETARY OF STATE
ALLAHASSEE, FLORING

D. BRUCE FEB 21 2012 EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	CCT: T-n & OUT Services Group LLC	
	Name of Limited Liability Company	
The end	closed Articles of Organization and fee(s) are submitted for filing.	
Please r	return all correspondence concerning this matter to the following:	
-	Antonia P. Riveron Name of Person	
	wane of Person	
-	In a Out Services Group LCC Firm/Company	
	Firm/Company	
-	1078 N.W. 132 CT	
	Address	
_	Miam: A. 331Y2 City/State and Zip Code	
	City/State and Zip Code	12 F
-	E-mail address: (to be used for future annual report notification)	
For furt	ther information concerning this matter, please call:	Õ [≩ [T
	Arran's Riverson at (35) 606-4350 95 Name of Person Area Code & Daytime Telephone Number 977	夢 C
Enclose	ed is a check for the following amount:	
\$125.00	City/State and Zip Code Riveron Antonio C (Bell south, net E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call: Antonio City/State and Zip Code E-mail address: (to be used for future annual report notification) Antonio City/State and Zip Code E-mail address: (to be used for future annual report notification) Antonio City/State and Zip Code E-mail address: (to be used for future annual report notification) Antonio City/State and Zip Code Antonio C	ee, us & closed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

In a OUT	Services GROUP LLC
(Must end with the words	"Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address	ess of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1078 NW 132 CT.	1077 N.W 133 CT Miam: Fr. 33172
Miam: F1. 33182	Miami F1. 33112
	Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve a business entity with an active Florida registrate.) The name and the Florida street add	s its own Registered Agent. You must designate an individual or another ion.) ress of the registered agent are:
(The Limited Liability Company cannot serve a business entity with an active Florida registrate.) The name and the Florida street add	s its own Registered Agent. You must designate an individual or another ion.) ress of the registered agent are:
The name and the Florida street add	s its own Registered Agent. You must designate an individual or another ion.) ress of the registered agent are:
The name and the Florida street add	s its own Registered Agent. You must designate an individual or another ion.) ress of the registered agent are:
The name and the Florida street add Light Acres Florida registration in the property of the	s its own Registered Agent. You must designate an individual or another ion.) ress of the registered agent are:

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)

EFFECTIVE DATE DATE DATE 17/02

ARTICLE I - Name:

Page 1 of 2

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

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

	Name and Address:
"MGRM" = Managing N	
MGR	Antonia Riveran
	1078 S.W 132 CT Miam: Fr. 33182
•	
	
(Use attachment if neces	1 1
RTICLE V: Effective date, if of an effective date is listed, the	other than the date of filing: 2 17 2012 (OPTIONAL) date must be specific and cannot be more than five business days prior
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RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of file	other than the date of filing: 2 17 2012 (OPTIONAL) date must be specific and cannot be more than five business days prior ing.)
RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of file REQUIRED SIGNATU	other than the date of filing: 2012 (OPTIONAL) date must be specific and cannot be more than five business days prior ing.) URE:
RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of fil REQUIRED SIGNATU	other than the date of filing:
RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of fil REQUIRED SIGNATU Signature (In accordance we constitutes an af I am aware that	other than the date of filing:
RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of fil REQUIRED SIGNATU Signatu (In accordance we constitutes an af I am aware that	other than the date of filing: 2 17 2012 . (OPTIONAL)
RTICLE V: Effective date, if of an effective date is listed, the or 90 days after the date of fil REQUIRED SIGNATU Signatu (In accordance we constitutes an af I am aware that	other than the date of filing:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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