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06/22/12--01025--019 **160.00

EFFECTIVE DATE 4/18/12

SECRETARY OF STATE BIVISION OF CORPORATIONS

14 2/18

TO: Registration Section Division of Corporations
SUBJECT: Excellence Services Unlimited 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:
Genice B. Collins-Davis Name of Person
Excellence Services Unlimited LLC
P O Box 1161 Lakeland, FL 33802
Lakeland, FL 33802
City/State and Zip Code
genice.collins@yahoo.om E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Genice B. Collins-Davis at (863) 614-7771
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{\$\subseteq \text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)}}
Mailing Address Street/Courier Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

EFFECTIVE DATE 4/8/12

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTI	Tr 1	,	Na	m 0 .
AKII	 , P.	-	IV2	me:

The name of the Limited Liability Company is:

Excellence Services Unlimited 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:	Mailing Address:
4146 Whistlewood Circle	P O Box 1161
Lakeland, Florida 33811	Lakeland, Florida 33811

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:

Genice B	Collins-Davis
	Name
4146 W	histlewood Circle
	Florida street address (P.O. Box NOT acceptable)
Lakeland	_{FL} 33811
	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

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" = Manager	ging Member	
MGR		Genice B. Collins-Davis
	-	4146 Whistlewood Circle
		Lakeland, FL 33811
MGMR	_	Melonie A. Collins-Evans
	-	P. O. Box 1161
		Lakeland, FL 33802
	,	
	•	,
	-	•
		Thin is
(Use attachment if r	necessary)	
	e to a la la	06/19/2012
LE V: Effective dat	te, if other than the	e date of filing: 06/18/2012 (OPTIONA
days after the date	i, the date must b	pe specific and cannot be more than five business day
uays after the date	or ming.)	
<u>REQUIRED</u> SIGN	NATURE:	

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Signature of a member or an authorized representative of a member.

Genice B. Collins-Davis

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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