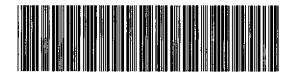
## 1200012/17/

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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09/20/12--01011--007 \*\*125.00

J. SAULSBERRY EXAMINER

SEP 21 2012

## **COVER LETTER**

TO: Registration Division of C					
SUBJECT: Glen	da Cleaning and I	Home Serv	vice		
Sobsect.		ed Liability Comp			
The enclosed Articles	of Organization and fee(s) are	submitted for filin	ng.		
Please return all corres	spondence concerning this mat	ter to the following	g:		
Glenda \	Wong				
		Name of Person			
		Firm/Company			<del></del>
5459 Vir	neland Rd, apt 421	·			
	.o.a.i.a i ta, apt 121	Address			
Orlando, F	FI. 32811				
<u></u>		y/State and Zip Cod	le		
glenda062	7@mcn.com				
	E-mail address: (to be used	for future annual rep	ort notification)	A SE	22
For further information	E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:				
Glenda Wong	<del> </del>	_ <sub>at (</sub> 321	331-6015	ARY VSSE	20 M
Name	e of Person	Area Cod	e & Daytime Telep	Shone Number 1	E (
Enclosed is a check	for the following amount:			)RIE	<u>क</u>
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fili Certified Co (additional cop	рру	\$160.00 Filing F Certificate of Sta Certified Copy (additional copy is e	itus &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton I	Courier Address tion Section of Corporations Building ecutive Center C		

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:					
Glenda Cleaning and Home S					
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
	5459 Vineland Road , Apt. 4211 Orlando, Fl. 32811				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	tered Agent. You must designate an individual or another				
The name and the Florida street address of the r					
Glenda Wong					
5459 Vineland Ro	pad, apt 4211  liress (P.O. Box NOT acceptable)				
Orlando,	<u></u>				
City, Sta	ate, and Zip				
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S				

(CONTINUED)

Registered Agent's Signature (REQUIRED)

## 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 MGR Glenda Wong 5459 Vineland Road, Apt 4211 Orlando, FL. 32811 (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (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. 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.)

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)