2/2000/38828

(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:			
A. LUNT NOV -1 2012			
EXAMINER			

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10/29/12--01006--011 **135.00

SECRETARY OF STATE

COVER LETTER

TO:

TO: Registration Section Division of Corporations							
SUBJECT: Castillo's Carpet Cleaning LLC. Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing.							
					Please	eturn all correspondence concerning this matter to the following:	
						Michael Castillo Jr.	
	Name of Person						
Firm/Company							
	31071 Ave E.	MIZ OCT 29					
	Address						
	ig Pine Key FL. 33043	<u>171</u> − €					
-	City/State and Zip Code	II					
	nac457@gmail.com	Sial Len					
-	E-mail address: (to be used for future annual report not						
For fur	ner information concerning this matter, please call:						
Michael Castillo Jr. at / 305 764-5217							
	Name of Person Area Code & Da	ytime Telephone Number					
	d is a check for the following amount: Filing Fee \$\sum \text{\$130.00 Filing Fee & Certified Copy} (additional copy is end)	Certificate of Status &					
	Mailing AddressStreet/CourierRegistration SectionRegistration SeDivision of CorporationsDivision of CoP.O. Box 6327Clifton BuildinTallahassee, FL 323142661 ExecutiveTallahassee, FI	ction rporations g e Center Circle					

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Castillo's Carpet Cleaning LLC	
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
31071 Ave E. 31071 Big Pine Key FL.	31071 Ave E. 31071 Big Pine Key FL.
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the remarks Michael Castillo Jr Name 31071 Ave E. Florida street address	112 Q
Big Pine Key FL.	EL 31071
City, State	e, and Zip
liability company at the place designated in th registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of alformance of my duties, and I am familiar with and ered 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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGR	Michael Castillo Sr			
	31071Ave E. Big Pine Key FL 33043			
MGR	Michael Castillo			
	31071Ave E. Big Pine Key FL 33043			
MGRM	Jeremy Castillo			
	31071Ave E. Big Pine Key FL 33043			
MGRM	Melanie Castillo 31071Ave E. Big Pine Key FL 33043			
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing:				
REQUIRED SIGNATURE:				
Signature of a mem	per 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.)				
Michael Cast				
	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)