

L12000152797

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

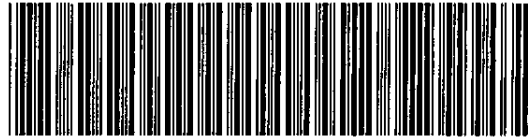
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12 DEC -5 PM 4:37  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

November 28, 2012

State of Florida  
Registration Section  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

RE: Articles of Organization  
PT CLEANING & RESTORATION, LLC

Dear Sirs:

*67913728- Money Ord.*

Enclosed please find check numbered 7, in the amount of \$130.00 to cover costs of Filing Fee and Certificate of Status.

Also enclosed please find the original Articles of Organization along with one copy of same.

Please file the enclosed Articles of Organization and return correspondence to:

Patricia M. Narciso  
445 Lakeview Avenue  
Titusville, FL 32796  
Tele: 321-225-9533

Your immediate attention to this matter is appreciated.

Very truly yours,

*P.m.n.*

PATRICIA M. NARCISO

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I.

The name of the Limited Liability Company is:

PT CLEANING & RESTORATION SERVICES, LLC

ARTICLE II.

The Street address of the principal office is:

445 Lakeview Avenue  
Titusville, FL 32796

The mailing address of the Limited Liability Company is:

445 Lakeview Avenue  
Titusville, FL 32796

ARTICLE III.

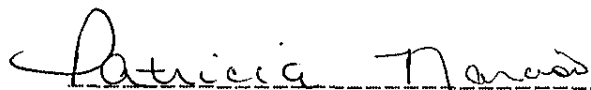
The purpose for which this Limited Liability Company is organized is: Commercial Cleaning and Removal of debris from the premises and any and all other lawful business.

ARTICLE IV.

The name and Florida street address of the Registered Agent is:

PATRICIA M. NARCISO  
445 Lakeview Avenue  
Titusville, FL 32796

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.



Registered Agent Signature  
PATRICIA M. NARCISO

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TALLAHASSEE, FLORIDA

ARTICLE V.

The name and address of Managing Member/Manager: .

Title: Manager

PATRICIA M. NARCISO

445 Lakeview Avenue

Titusville, FL 32796

ARTICLE VI.

The effective date for this Limited Liability Company shall be:

November 30, 2012



Signature of Member

PATRICIA M. NARCISO