

L13000018167

(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



200244076502

02/04/13--01065--007 **285.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 FEB -4 AM 10:46

C. LEWIS
FEB -5 2013
EXAMINER

(850) 245-6051.

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **CCNS CLEANING SERVICE**
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:

Marie Carline Antenor

Name of Person

CCNS Cleaning Service

Firm/Company

810 N.W. 168 Drive

Address

Miami Gardens, Florida 33169

City/State and Zip Code

marieantenor77@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marie Carline Antenor at (**786**) **370-3662**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|----------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed) |
|----------------------------------------------|----------------------------------------------------------------------|------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|

Mailing Address

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

Street/Courier Address

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CCNS CLEANING SERVICE 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:

CCNS CLEANING SERVICE

810 N.W. 168 Drive

Miami Gardens, Florida 33169

Mailing Address:

CCNS CLEANING SERVICE

810 N.W. 168 Drive

Miami Gardens, Florida 33169

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:

Saturnide Saintfar

Name

2332 Salvage Boulevard

Florida street address (P.O. Box **NOT** acceptable)

Port St Lucie FL 34953

City, State, and Zip

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 FEB -4 AM 10:46

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)

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

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2013 FEB -4 AM 10:46

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR	Marie Carline Antenor 810 N.W. 168 Drive Miami Gardens, Florida 33169
MGRM	Cornellie Elmire Antenor 810 N.W. 168 Drive Miami Gardens, Florida 33169
MGRM	Natalie Jupsyna Antenor 810 N.W. 168 Drive Miami Gardens, Florida 33169
MGRM	Marie Andre Auguste 810 N.W. 168 Drive Miami Gardens, Florida 33169

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.)

Marie Carline Antenor

Typed or printed name of signer

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)