# 13000089000

(Requestor's Na	me)			
(Address)				
(Address)				
(City/State/Zip/F	Phone #)			
PICK-UP WAIT	r MAIL			
(Business Entity	Name)			
(Document Number)				
Certified Copies Certifie	cates of Status			
Special Instructions to Filing Officer:				
JUN 2 0 2013				
L. SELLERS				

Office Use Only



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SECRETARY OF STATE ALLANASSEE, FLORIDA

FILED

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

Alderman Janitorial Services, 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:

## Christopher Spires

Name of Person

## Alderman Janitorial Services, LLC.

Firm/Company

## 12734 Kenwood Lane, Suite 27

Address

Fort Myers, FL 33907

City/State and Zip Code

#### aldermanjanitorial@gmail.com

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

For further information concerning this matter, please call:

## **Christopher Spires**

\_\_239

936-4336

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□ \$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

	nited Liability Com	pany is:
Alderman Janitorial Servi		
(Must	t end with the words "Lin	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Add	ress:	
The mailing address	and street address	of the principal office of the Limited Liability Company is:
Principal Office Ad	<u>ldress:</u>	Mailing Address:
12734 Kenwood Lane, Su	uite 27	12734 Kenwood Lane, Suite 27
Fort Myers, FL 33907		Fort Myers, FL 33907
	<del></del>	
The name and the Flo	orida street address	of the registered agent are:
<u> </u>	Jan Spires	
<u> </u>	Jan Spires	Name
<del>-</del>	Jan Spires 12734 Kenwood Lane, S	
<del>-</del>	12734 Kenwood Lane, S	
	12734 Kenwood Lane, S	suite 25 street address (P.O. Box <u>NOT</u> acceptable)
	12734 Kenwood Lane, S Florida	suite 25 street address (P.O. Box <u>NOT</u> acceptable)

(CONTINUED)

Registered Agent's Signature (RBQUIRED)

Page 1 of 2

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SECRETARY OF STATE

#### 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" = Manag "MGRM" = Mana			
MGR/P		Christopher Spires	
MGR/V		Erich Spires	
MGR/T	_	Heather Tuck	
	<del>_</del>		
(Use attachment i	if necessary)		
ARTICLE V: Effective ( (If an effective date is li prior to or 90 days after	isted, the date must	date of filing: July 1, 2013 be specific and cannot be more	(OPTIONAL) e than five business days
<u>REQUIRED</u> SIG	GNATURE:		

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.)

Christopher Spires

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)