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## **COVER LETTER**

TO:	Registration S Division of Co					
CHDIE	Galla	achers Cleani	ng			
SUBJECT: Name of Limited Liability Company						
The en	closed Articles o	of Organization and fee(s) are	submitted for filing.			
Please	return all corres	pondence concerning this matt	er to the following:			
	Marlien	eide Gallache	er			
			Name of Person	,		
Gallachers Cleaning						
			Firm/Company			
	2510 21st Avenue West					
Address						
	Bradenton, FL 34205					
_	marlineid	egallacher@gmail	,	SEO SEO	 درو سے	
For fur	her information	E-mail address: (to be used to concerning this matter, please	for future annual report notification)	AHASS		
Ма	rlineide	Gallacher	_at ( <u>941</u> ) <u>565-36</u>			
	Name	of Person	Area Code & Daytime Telep	hone Number ON A	t S	
Enclos	ed is a check f	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 Statu Certified Copy (additional copy is encl	s &	
		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 C			

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:  Gallachers Cleaning 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 p	orincipal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
2510 21st Avenue West	2510 21st Avenue West				
Bradenton, FL 34205	Bradenton, FL 34205				
business entity with an active Florida registration.)  The name and the Florida street address of the  Marlineide Gallacher	registered agent are:				
Nam					
2510 21st Avenue West	HE L				
Florida street a	ddress (P.O. Box NOT acceptable)				
Bradenton, FL 34204					
City, S	State, and Zip				
liability company at the place designated in registered agent and agree to act in this capa all statutes relating to the proper and comple	o accept service of process for the above stated limited this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of the performance of my duties, and I am familiar with registered agent as provided for in Chapter 608, F.S				
Marlinikole 9 Registered Agent's Sign	allacker ature (REQUIRED)				

(CONTINUED)

Page 1 of 2

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
Manager	Marlineide Gallacher
	2510 21st Avenue West
	Bradenton, FL 34205
•	
	•
	••••
(Use attachment if necessary)	
(If an effective date is listed, the date must be	ne of filing: <u>July 1, 2013</u> . (OPTIONAL)  e specific and cannot be more than five business days
prior to or 90 days after the date of filing.)	As =
DECLUDED CICNATURE.	
<u>REQUIRED</u> SIGNATURE:	NA I FEBRUARY
111 1: 1	9/10
Marlineide	Vallacille
Signature of a member of	r an authorized representative of a member
constitutes an affirmation under the	8(3), Florida Statutes, the execution of this document epenalties of perjury that the facts stated herein are true.
MARLINEIDE	GALLACHER

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)