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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SUFFICIENTLY OF FILLING

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: <u>Tosephine's Cleaning Service LLC</u> 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:
PARRIE M. Powell
Name of Person
Josephine's Cleaving Service L.L.C.
1310 Dawson Deive
Tallahasser, Florida 32305
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
HARRIE M. Pruell at (80) 345-3326 3 G Area Code & Daytime Telephone Number 7.
Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$155.00 Filing Fee & \$\ \text{Certified Copy}\$\$ \$160.00 Filing Fee, \$\ \text{Certified Copy}\$\$ \$Certified Copy \$\ \text{Certified Copy}\$\$ \$Certified Copy

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

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Josephine's Clawing Serve 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: Mailing Address:
1310 Danson Vrve 1310 Danson Deve Tallahosser, +1. 32305 Tallahosser, +1. 32305
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:
Name 1310 Dayson Drive Florida street address (P.O. Box NOT acceptable)
Tallahassee, FL 32305 City, State, and Zip
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.,

(CONTINUED)

<u>Fitle:</u> 'MGR" = Manager	Name and Address:
'MGRM" = Managing Member	
MBR	Angela S. Henderson
	1014 ShAner (1. 425 Tallabasses to 32312.
MGR	Troops Y. Porell
	1510 Dawson Deve
4.A. n	Ja Ma M S. 49, 41, 32308
MERY	PARCE M. Powell
•	1310 Danson DRIVE
	Totlahassee, florida 32315
	SE SE
·	9
Use attachment if necessary)	
ose attachment if necessary)	
LE V: Effective date, if other than th	ne 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.)

iE M. Koujell

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)

A Parie M. Powell have no intentions of Beinstating Josephiness Cleaning Service LLC Under DOC. # L11000081767 and I release the Mame.

Paris M. Powell

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