

L13000137281

(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:

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Office Use Only



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09/30/13--01017--026 **130.00

EFFECTIVE DATE

10/1/13

RECEIVED
13 SEP 30 PM 1:01
SECTION OF CORPORATE AFFAIRS

13 SEP 30 PM 1:13
SECTION OF STATE
TREASURER'S OFFICE

APPROVED
FILED

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

Tri-County Cleaning Services of NE FL
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:

Alvetra Gibbs-Davis

Name of Person

Tri-County Cleaning Services of NE FL LLC

Firm/Company

725 Turkey Point Dr.

Address

Orange Park, FL 32065

City/State and Zip Code

davial1569@gmail.com

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

For further information concerning this matter, please call:

Alvetra Gibbs-Davis at (904) 422-5693

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 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:

Tri-County Cleaning Services of NE FL 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:

725 Turkey Point Dr.
Orange Park, FL 32065

SAME

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:

Alvetra Gibbs-Davis

Name

725 Turkey Point Dr.

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

Orange Park FL 32065

City, State, and Zip

SECRET
STATE
TALLAHASSEE, FLORIDA

13 SEP 30 PM 1:13

FILED

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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Alvetra Gibbs-Davis
725 Turkey Point Dr.
Orange Park, FL 32065


MGRM

Mack Davis
725 Turkey Point Dr.
Orange Park, FL 32065

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 10/01/13 (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.)

Alvetra Gibbs-Davis

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)

13 SEP 30 PM 1:13
STATE
TALLAHASSEE
FILED

47704
FILED