4000125934

		· · · · · · · · · · · · · · · · · · ·
(Re	equestor's Name)	
(Ad	ldress)	
(Ac	idress)	
(Cit	ty/State/Zip/Phone	e #)
•	• • • • • • • • • • • • • • • • • • • •	- ···•
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(,	···• ,
	ocument Number)	
(DC	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		ŀ
		-
		1
		





700261742047

08/11/14--01046--020 **160.00

14 AUG 11 PM 12: 03

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Maids Direct	L.L.C.
Name of Lim	nited Liability Company
The enclosed Articles of Organization and fec(s) are	e submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Jamie Whit	-lock
	Name of Person
Maids Dire	C+ LLC Firm/Company
2659 Waym	eyer Dr. Address
Orlando, Fl	ty/State and Zip Code
Maids Direct@	ity/State and Zip Code
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, plea	se call:
Jamie Whitlock at (4) Name of Person	HO7 H38-2532 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\text{Certificate of Status}\$	Certified Copy (additional copy is enclosed) \$\begin{align*} \begin{align*} \beg
Mailing Address	Street/Courier Address
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	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:		
Maids Direct	LLC	
(Must end with the words "Limited	Liability Company, "L.L.C.," or "L	LC.")
ARTICLE II - Address: The mailing address and street address of the principal of	ffice of the Limited Liability Compa	iny is:
Principal Office Address:	Mailing Address:	
2659 Waymeyer Dr.	2659 Waymeyer S	Òr.
Orlando, Fl 32812	Oriando, Pt. 3281	2
ARTICLE III - Registered Agent, Registered Office,		
(The Limited Liability Company cannot serve as its own another business entity with an active Florida registratio		ale an individual or
The name and the Florida street address of the registered	agent are:	
<u>Jamie Elisa V</u>	<u>vhiHOCK</u>	
Name		
2659 Waymeyer		
Florida street address (P.O. Box	· · · · · · · · · · · · · · · · · · ·	
Orlando	FL 32812	
City	Zip	
Having been named as registered agent and to accept set the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the ob Chap	nt the appointment as registered agen of all statutes relating to the proper o	t and agree to act in this and complete performance
Jamie Elisa	Whitleck	
Registered Agent's Signa		
(CONTINU	ED)	
Page 1 of 2	2	

Use attachment if necessary) We attachment i	<u>Title:</u> "AMBR" = Authorize	ud Mamhar	Name and Address:	
Use attachment if necessary) EV: Effective date, if other than the date of filing: Cive date is listed, the date must be specific and cannot be more than five business days prior to or of filing.) EV: Other provisions, if any. REQUIRED SIGNATURE: Jame Lisa Whitlock		a Member		
Use attachment if necessary) EV: Effective date, if other than the date of filing: Cive date is listed, the date must be specific and cannot be more than five business days prior to or if filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), 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.) Uamie Elisa Whitlock Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent			Jamie Whitlock	
Use attachment if necessary) 3. V: Effective date, if other than the date of filing:	η- (μ	_	2659 (STORES WAY	mever Dr.
Use attachment if necessary) 3. V: Effective date, if other than the date of filing:			oclardo" FL.73	812
Use attachment if necessary) E.V. Effective date, if other than the date of filing:	kA / A			
Use attachment if necessary) E.V. Effective date, if other than the date of filing:	MUGK	_	Jamie Whitlock	
Use attachment if necessary) E.V. Effective date, if other than the date of filing:			265 9 Wayneyer	<u> </u>
EV: Effective date, if other than the date of filing:			OF WAR, FL.J.	<u> </u>
EV: Effective date, if other than the date of filing:				
EV: Effective date, if other than the date of filing:				
EV: Effective date, if other than the date of filing:		* }		
EV: Effective date, if other than the date of filing:				
EV: Effective date, if other than the date of filing:				
EV: Effective date, if other than the date of filing:				
EV: Effective date, if other than the date of filing:				
EV: Effective date, if other than the date of filing:	ar 1			
Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), 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.) Uamie Elisa Whitlock Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	EV: Effective date, if ctive date, if	other than the date of fill	ing:and cannot be more than five busin	(OPTIONAL) css days prior to or
Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), 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.) Uamie Elisa Whitlock Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	EV: Effective date, if ctive date is listed, th f filing.)	other than the date of file the date must be specific	ing:and cannot be more than five busin	(OPTIONAL) ess days prior to or
(In accordance with section 605.0203 (1) (b), 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.) Uamie Elisa Whitlock Typed or printed name of signee	EV: Effective date, if ctive date is listed, the filing.) EVI: Other provisions	other than the date of file the date must be specific s, if any	and cannot be more than five busin	(OPTIONAL) ess days prior to or
(In accordance with section 605.0203 (1) (b), 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.) Uamie Elisa Whitlock Filing Fees: State Filing Fees: State Filing Fees: State	EV: Effective date, if ctive date is listed, th f filing.) EVI: Other provision	other than the date of file the date must be specific s, if any	and cannot be more than five busin	(OPTIONAL) css days prior to or
constitutes a third degree felony as provided for in s.817.155, F.S.) Uamie Elisa WhitHock Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	EV: Effective date, if ctive date is listed, th f filing.) EVI: Other provision	other than the date of file ne date must be specific s, if any.	and cannot be more than five busin	ess days prior to or
Uamie Elisa Whitlock Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if ctive date is listed, the filing.) E VI: Other provisions REQUIRED SIGNA (In accordate constitutes)	other than the date of file the date must be specific s, if any. TURE: Jame Cuba Signature of a member nee with section 605.020 an affirmation under the	and cannot be more than five busing the business of business the busine	a member. ion of this documented herein are true.
Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if ctive date is listed, the filing.) E VI: Other provisions REQUIRED SIGNA (In accordations it it is a may are	other than the date of filine date must be specific s, if any. TURE: Jame Cusa Signature of a member new with section 605.020 an affirmation under the that any false informatio	and cannot be more than five busing the control of	a member. ion of this documented herein are true. partment of State
Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if ctive date is listed, the filing.) E VI: Other provisions REQUIRED SIGNA (In accordations it it is a may are	TURE: Jame Cuba Signature of a member an affirmation a third degree felony as p	and cannot be more than five busing the control of	a member. ion of this documented herein are true. partment of State
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if ctive date is listed, the filing.) E VI: Other provisions REQUIRED SIGNA (In accordations it it is a may are	other than the date of filine date must be specific s, if any. TURE: Jame Cusa Signature of a member nice with section 605.020 an affirmation under the that any false information a third degree felony as pure Cumie Elis	and cannot be more than five busing the control of	a member. ion of this documented herein are true. partment of State
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	E V: Effective date, if ctive date is listed, the filing.) E VI: Other provisions REQUIRED SIGNA (In accordations it it is a may are	other than the date of filine date must be specific s, if any. TURE: Jame Cusa Signature of a member nice with section 605.020 an affirmation under the that any false information a third degree felony as pure Cumie Elis	and cannot be more than five busing the control of	a member. ion of this document of the true. partment of State
	E V: Effective date, if ctive date is listed, the filing.) E VI: Other provisions REQUIRED SIGNA (In accordations it it is a may are	other than the date of filine date must be specific s, if any. TURE: Jame Cusa Signature of a member nice with section 605.020 an affirmation under the that any false information a third degree felony as pure Cumie Elis	and cannot be more than five busing the control of	a member. ion of this documented herein are true. partment of State
	E V: Effective date, if ctive date is listed, the filling.) E VI: Other provisions REQUIRED SIGNA (In accordate constitutes if am aware constitutes if a maware constitutes	TURE: Jame Cusa Signature of a member nee with section 605.020 an affirmation under the that any false informatio a third degree felony as pure that any false information and the custom formation at the custom formation formation at the custom formation formation for a custom formation for a custom formation for a custom formation for a custom for a custom formation for a custom for a cust	and cannot be more than five busing the control of	a member. ion of this documented herein are true. partment of State
Z : C	(In accorda constitutes I am aware constitutes \$ 30.00 Certified C	TURE: Jame Cuba Signature of a member nee with section 605.020 an affirmation under the that any false informatio a third degree felony as pure Cuba Type for Articles of Organiz	and cannot be more than five busing the control of	a member. ion of this document ed herein are true. partment of State