

L14000163267

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

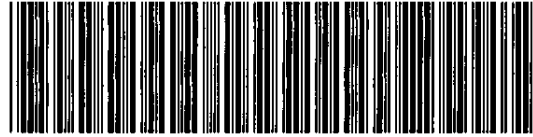
Special Instructions to Filing Officer:

OCT 20 2014

A. LUNT

W14-59/57

Office Use Only



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09/22/14--01045--026 **135.00

OFFICE OF STATE
TREASURER

2014 OCT 14 PM 2:36

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 26, 2014

JOANES ST. SURIN
2950 N.W. 55 AVE. #2B
LAUDERHILL, FL 33313

SUBJECT: SPARKLE'S CLEANING SERVICES, LLC
Ref. Number: W14000059157

FILED
2014 OCT 14 PM 2:36
TALLAHASSEE, FLORIDA

We have received your document for SPARKLE'S CLEANING SERVICES, LLC and your check(s) totaling \$135.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Pursuant to section 605.0207, F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on September 22, 2014. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Agnes Lunt
Regulatory Specialist II

Letter Number: 014A00020728

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SPARKLE'S Cleaning Services
Name of Limited Liability Company

FILED
2014 OCT 14 PM 2 36
TALLAHASSEE, FL 32301

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joanes St Surin

Name of Person

SPARKLE'S Cleaning Services

Firm/Company

2950 N.W. 55 Ave #2B

Address

Lauderhill Florida 33313

City/State and Zip Code

WWW.SJoanes12@Ymail.com

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

For further information concerning this matter, please call:

Joanes St Surin

Name of Person

at (754)

Area Code

234-0956

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2014 OCT 14 PM 2:36

ARTICLE I - Name:

The name of the Limited Liability Company is:

The I Sparkle's Cleaning Services, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

2950 N.W. 55 Ave #2B
Lauderhill Florida 33313

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:

James St Surin

Name

2950 N.W. 55 Ave #2B

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

Lauderhill

FL

33313

City

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 605, F.S.

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

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Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

James St Swin → MGR 2950 N.W. 55 Ave #2B
Lauderhill Florida 33313

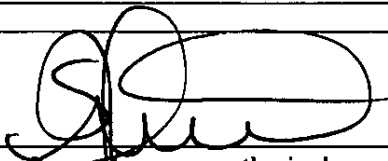
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 09/22/2014 (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.)

ARTICLE VI: 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.)

James St Swin

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)