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COVER LETTER

Division of Corporations	
SUBJECT: Elite Preservation Services, LLC	
	ed Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this matt	er to the following:
George T. Harris sr.	25
	Name of Person
Elite PreservationServices, LLC	
Elito (1636) Valid1150 (1665), EEO	Firm/Company
4881 Timothy St.	Address
	Address
Middleburg, Florida 32068	
	/State and Zip Code
elitepreservationservices@yahoo.com C E-mail address: (to be used i	lite preservation 1@ gmail.com or future annual report notification)
For further information concerning this matter, please	call:
George T. Harris Sr. at (90	
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
☐ \$125.00 Filing Fee	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy
	(additional copy is enclosed)
Malling Address Registration Section	Street/Courier Address Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
- minimumory a at a are a r	Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Elite Preservation Services, LLC (Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
4881 Timothy Street Middleburg FL, 32068	4881 Timothy St. Middleburg Fl 32068	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Ranother business entity with an active Florida registration.) The name and the Florida street address of the registered a	Registered Agent. You must designate an indivi	idual or
	igent are.	
George T. Harris Sr. Name		
4881 Timothy St. Florida street address (P.O. Box	NOT acceptable)	
Middleburg	FL 32068	
City	Zip	
Having been named as registered agent and to accept servence 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 oblication.	the appointment as registered agent and agree t f all statutes relating to the proper and complete	to act in this e performance
Can Thus Registered Agent's Signature	ire (REQUIRED)	15 JAN SECRET
(CONTINUE	(D)	
Page 1 of 2		

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
ambr	George T. Harris Sr.
	4881 Timothy st.
	Middleburg fl. 32068
	
(Use attachment if necessary)	
EV: Effective date, if other than the date fective date is listed, the date must be spoof filing.)	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 o
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