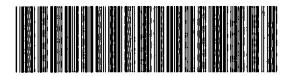
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(F	Requestor's Name)
(<i>P</i>	address)
(<i>F</i>	address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(Ľ	Occument Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:

Office Use Only



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N. Culligan MAR 1 U 2015

COVER LETTER

то:	Registration Section Division of Corporations		
SUBJI	ECT: FIXUP SERVICES LLC. Name of Liz	mited Liability Company	
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this m	natter to the following:	
	FERENC GASPAR	Name of Person	
	FIXUP SERVICES LLC.	Firm/Company	
	2821 SOMERSET DR. #205	Address	
	LAUDERDALE LAKES, FLORIDA		
K	ECSMARSZKI@AOL.COM E-mail address: (to be use	ed for future annual report notifica	ation)
For fu	ther information concerning this matter, ple	ase call:	
<u>FERE</u>	NC GASPAR at (at (at (631) 506-6274 Area Code Daytime Te	lephone Number
	need is a check for the following amount: 00 Filing Fee \$\Boxed{\subseteq} \$\$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 Addr Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	tions ter Circle

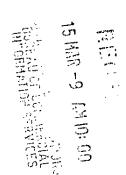


FLORIDA DEPARTMENT OF STATE Division of Corporations

January 2, 2015

FERNEC GASPAR 2821 SOMERSET DR #205 LAUDERDALE LAKES, FL 33311

SUBJECT: FIXUP SERVICES LLC Ref. Number: W15000000121



We have received your document for FIXUP SERVICES LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 015A00000027

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
FIXUP SERVICES LLC. (Must end with the words "Limited	d Liability Company, "L.L.C.," or "LL	.C.")
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Compan	ny is:
Principal Office Address:	Mailing Address:	
2821 SOMERSET DR. #205 LAUDERDALE LAKES, FL 33311	2821 SOMERSET DR. #205 LAUDERDALE LAKES, FL 333	311
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration.) The name and the Florida street address of the registered.	n Registered Agent. You must designation.)	te an individual or
FERENC GASPAR Name		₩ 3 5 5
2821 SOMERSET DR. #205 Florida street address (P.O. Bo		R -9 A
LAUDERDALE LAKES	FL 33311	11./2 3
City Having been named as registered agent and to accept so the place designated in this certificate, I hereby accep capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the ol	Zip ervice of process for the above stated li to the appointment as registered agent of all statutes relating to the proper an	and agree to act in this nd complete performance

Chapter 605, F.S.

(CONTINUED)

Page 1 of 2

Registered Agent's Signature (REQUIRED)

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"AMBR" = Authorized Member "MGR" = Manager AMBR ERENC GASPAR 2821 SOMERSET DR. #205 LAUDERDALE LAKES, FL 33311		TRIAL		N and Address.		
"MGR" = Manager AMBR FERENC GASPAR 2821 SOMERSET DR. #205 LAUDERDALE LAKES, FL 33311 (Use attachment if necessary) TICLE V: Effective date, if other than the date of filing: 03/09/2015 (OPTIONAL) an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days aft date of filing.) TICLE 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.) FERENC GASPAR		<u>Title:</u> "AMBR" = Authorized	Member	Name and Address:		
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)