

L150000 43612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

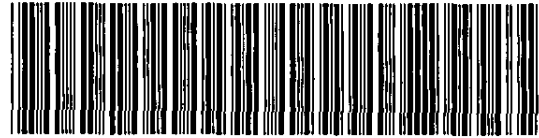
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Will-wait

Office Use Only



600269836886

03/12/15--01001--013 **160.00

RECEIVED
15 MAR 11 PM 2:57
DIVISION OF REGISTRATION

RECEIVED
15 MAR 11 PM 2:57
TALLINN, ESTONIA

M. MILLIGAN
EXAMINER

MAR 11 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: D+T Cleaning and Maintenance, LLC
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:

Tiffany Spooner
Name of Person

Firm/Company

12314 Dragonfly Ct.
Address

Tallahassee FL 32317
City/State and Zip Code

Spooner.Tiffany.1983@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tiffany Spooner at (850) 766-5257
Name of Person Area Code 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

D + T Cleaning and Maintenance, 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:

12316 Dragonfly Ct
Tallahassee, FL 32317

Mailing Address:

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:

Tiffany Spooner
Name
12316 Dragonfly Ct
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32317
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..

Tiffany Spooner
Registered Agent's Signature (REQUIRED)

(CONTINUED)

15 MAR 11 PM 2:57
FILED
TALLAHASSEE, FLORIDA
ARTICLE

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

AmBr

Tiffany Spacher
12316 Dragonfly Ct.
Tallah, FL 32317

APR 11 1968
15 MAR 11 PM 2:57