L1500 66 56464

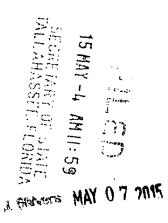
(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300272550973

05/04/15--01030--016 **130.00



A and B Pressure and Cleaning Service LLC.

Azam Mohamed

6437 SW 23rd street Miramar FL 33023

954 812-3494

COVER LETTER

	on Section f Corporations		
SUBJECT:	and B Pressure Name of Lin	e and Cleaning Se mited Liability Company	vvice LLC.
The enclosed Articl	es of Organization and fee(s) ar	re submitted for filing.	
Please return all con	тespondence concerning this m	atter to the following:	
	tzam Mol	named	
	•	Name of Person	
		Firm/Company	
	6437 SW 23	grd Street Address	
	Miramar, FL	33023 City/State and Zip Code	
		ve Cleaning @ gmail I for future annual report notificati	.com
	E-mail address: (to be used	d for future annual report notificati	ion)
For further information	on concerning this matter, pleas	se call:	
Alar	n Mohamed at (954) 812 34	194
	Name of Person A	Area Code Daytime Telephon	e 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)
s.	Tailing Address	Stuart Addungs	

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

$\textbf{ARTICLES} \, \textbf{OF} \, \textbf{ORGANIZATION} \, \textbf{FOR} \, \textbf{FLORIDA} \, \textbf{LIMITED} \, \textbf{LIABILITY} \, \textbf{COMPANY}$

ARTICLE I - Name:	•				
The name of the Limited Liability	Company is:				
(Must end w	and B Pres	SUYE <u>a</u> Liability Com	nd Clea pany, "L.L.C.	ning Servi ," or "LLC.")	a UC.
ARTICLE II - Address: The mailing address and street ad	dress of the principal of	fice of the Lin	nited Liability	Company is:	
<u>Principa</u>	l Office Address:			Mailing Addre	<u>ss</u> :
6437 s	W 23rd Stree	4	6425	SW 24th	Street
Hiramar	FL 33023		Miram	ar, FL 330	23
The name and the Florida street a	_	agent are: Mol	named		
	G437 S Florida street address	w 23rds	+ Miram	ar FL 330	2 3
	Mira mar City	FL	3	5023	
	City	State		Zip	
daving been named as registered a place designated in this certificate, further agree to comply with the pro Im familiar with and accept the obl	I hereby accept the appo ovisions of all statutes rei	intment as reg lating to the pr	istered agent o oper and com	and agree to act in plete performance	this capacity. I of my duties, and I
	A Registe	Mark as red Agent's S	gnature (REC	(UIRED)	. Aro

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authoriz "MGR" = Manager	ed Member	Name and Address:
۸		
AMRA		Aram Mohamed
		6437 SW 23 rd street Mirgnar, FL 33027
		,
		
		
(Use attachment if no	•	iling: 4/30/15 (OPTIONAL)
CLE V: Effective date, iffective date is listed, to of filing.) If the date inserted in the	f other than the date of fi he date must be specifi	the applicable statutory filing requirements, this date will not be
CLE V: Effective date, iffective date is listed, to of filing.) If the date inserted in the cument's effective date	f other than the date of fi he date must be specifi his block does not meet on the Department of S	c and cannot be more than five business days prior to or 90 day the applicable statutory filing requirements, this date will not be l
CLE V: Effective date, iffective date is listed, to of filing.) If the date inserted in the cument's effective date	f other than the date of fine date must be specifically block does not meet on the Department of Sas, if any.	c and cannot be more than five business days prior to or 90 day the applicable statutory filing requirements, this date will not be l
CLE V: Effective date, iffective date is listed, to of filing.) If the date inserted in the cument's effective date of the cument's effective date.	f other than the date of fine date must be specifically block does not meet on the Department of Sas, if any.	c and cannot be more than five business days prior to or 90 day the applicable statutory filing requirements, this date will not be l
CLE V: Effective date, iffective date is listed, to of filing.) If the date inserted in the cument's effective date of the case of the country of the case of the	f other than the date of fine date must be specifically block does not meet on the Department of States, if any. ATURE: Signature of a member	the applicable statutory filing requirements, this date will not be late's records. Molamed er or an authorized representative of a member.
CLE V: Effective date, i ffective date is listed, t e of filing.) If the date inserted in the cument's effective date CLE VI: Other provision REQUIRED SIGNA (In ac	f other than the date of fine date must be specifically block does not meet on the Department of States, if any. ATURE: Signature of a member of a m	the applicable statutory filing requirements, this date will not be latte's records. Molaneo er or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document
CLE V: Effective date, i ffective date is listed, t e of filing.) If the date inserted in the cument's effective date CLE VI: Other provision REQUIRED SIGNA (In acconst I am	f other than the date of fine date must be specificated in the Department of States, if any. Signature of a member or a member of the section of itutes an affirmation unique aware that any false info	the applicable statutory filing requirements, this date will not be late's records. Molamed er or an authorized representative of a member.
CLE V: Effective date, i ffective date is listed, t e of filing.) If the date inserted in the cument's effective date CLE VI: Other provision REQUIRED SIGNA (In acconst I am	f other than the date of fine date must be specificated by the specification of the Department of States, if any. Signature of a member o	the applicable statutory filing requirements, this date will not be latte's records. Molamed er or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.)
CLE V: Effective date, infective date is listed, to e of filing.) If the date inserted in the cument's effective date of the cument's effective date is listed, the cument's effective date is listed, the cument's effective date is listed, the cument's effective date of the cumen	f other than the date of fine date must be specificated by the specification of the Department of States, if any. Signature of a member o	the applicable statutory filing requirements, this date will not be late's records. Molamed er or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State