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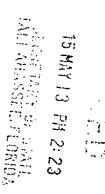
(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nar	me)
(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

то:	Registration Section Division of Corporations			
SUBJE	Exterior Plastering Services LLC			
SUBJE		imited Liabi	lity Company	
The cno	closed Articles of Organization and fee(s) a	are submitte	d for filing.	
Please	return all correspondence concerning this r	natter to the	following:	
	Svetlana Pavlyuchenko			
		Name o	f Person	
	Exterior Plastering Services LLC			
		Firm/C	ompany	
	678 SE Saint Johns St.			
		Add	ress	
	Lake City, FL 32025			
	lanapavlyuchenko@gmail.com	City/State a	nd Zip Code	
	E-mail address: (to be use	d for future	annual report notification	on)
For furth	er information concerning this matter, plea	se call:		
	•	578	615-9711	
	Name of Person	Area Code	Daytime Telephone	Number
Enclose	ed is a check for the following amount:			
\$125.00	0 Filing Fee \$130.00 Filing Fee & Certificate of Status	Certif	00 Filing Fee & led Copy nal 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 Address Registration Section Division of Corporatio Clifton Building 2661 Executive Cente Tallahassee, FL 32301	r Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ervices LLC.			
	with the words "Limite	d Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street a	ddress of the principal	office of the Limited	Liability Company is:	
<u>Princip</u>	al Office Address:		Mailing Addre	ess:
678 SE Saint Johns S	St	678 S	E Saint Johns St.	
Lake City FL 32025		Lake	City FL 32025	
	Svetlana Pavlyuche	Name		
	678 SE Saint Johns	St.		
	Florida street addre	ess (P.O. Box <u>NOT</u> ac	ceptable)	
	Lake City	FL	32025	
	City	State	Zip	
aving been named as registered (d agent and agree to act i	n this capacity. I e of my duties, and I

<u>Title:</u> "AMBR" = A	uthorized Member	Name and Address:	
"MGR" = Ma			
MGR	nugei	Svetlana Pavlyuchenko	
		678 SE Saint Johns St.	
		LaKe City, FL 32025	
			
			
<u>-</u>			
(Use attachme	ent if necessary)		
CLE V: Effective ffective date is le of filing.) If the date inser	listed, the date must be speted in this block does not $oldsymbol{\pi}$	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 neet the applicable statutory filing requirements, this date will no	
CLE V: Effective ffective date is less of filing.) If the date inser- cument's effective	e date, if other than the date listed, the date must be spetted in this block does not make the date on the Department of	ecific and cannot be more than five business days prior to or 90 neet the applicable statutory filing requirements, this date will no	
CLE V: Effective ffective date is le e of filing.) If the date inser- cument's effective CLE VI: Other pro-	e date, if other than the date listed, the date must be spetted in this block does not make date on the Department of the covisions, if any.	ecific and cannot be more than five business days prior to or 90 neet the applicable statutory filing requirements, this date will no	•
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CLE V: Effective ffective date is le e of filing.) If the date inser- cument's effective CLE VI: Other pro-	e date, if other than the date listed, the date must be spetted in this block does not move date on the Department of the constitutes an affirmation I am aware that any false constitutes a third degree	mber or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)	or be
CLE V: Effective ffective date is le e of filing.) If the date inser- cument's effective CLE VI: Other pro-	e date, if other than the date listed, the date must be spetted in this block does not make date on the Department of the control of the cont	mber or an authorized representative of a member. on 605.0203 (1) (b). Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)	Tont of the
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ARTICLE IV-