(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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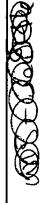




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SECRETARY OF STATE TALLAHASSEE, FLORIDA

# FLORIDA DEPARTMENT OF STATE Division of Corporations

May 26, 2015

DINA HELMADOLLAR 5218 DEXTER ST ORLANDO, FL 32807

SUBJECT: NO LIMIT CUSTOM-CLEANINGS-LLC

Ref. Number: W15000036846

We have received your document for NO LIMIT CUSTOM CLEANINGS LLC and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must submit Articles of Organization for the resulting Florida limited liability company along with the Articles of Conversion. The Articles of Organization must be signed by a member or an authorized representative of a member.

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.

Terri J Schroeder Regulatory Specialist II

Letter Number: 615A00010994

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: No Limit Custom Cleanings, UC 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:
Dina Helmadollar
Name of Person
Firm/Company
5218 Dexter Street
Address
orlando 7132807
city/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Divatelmadollaryon, 285-2303
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\frac{130.00}{1000}\$ Filing Fee \$\frac{155.00}{1000}\$ Filing Fee \$\frac{160.00}{1000}\$ Filing Fee, \$\frac{160.00}{1000}\$ F

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

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

NA	limit	Custom	Cleanings	LLC	
	(Must end w	ith the words "Limited	Liability Company, "L.L.C.,"	or "LLC.")	_

### **ARTICLE II - Address:**

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

The mailing address and street address of the principal office of the Limited Liability Company is:

rincipal Office Address:	Mailing Address:
5218 Dexter Street Orlando Florida 32807	5218 Dexter Street Orlando Florida 32807

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:

Dina Helmadollar	in the	F-3	
Name	1	2015	
600001	13-00	<u></u>	7
5218 Dexter Street	٠٠. الله		Carrier Carrier
Florida street address (P.O. Box NOT acceptable)	244 244 244	~~~	1
Orlando FL 32801		U	- Francisco
City Zip	<b>5</b>	Ü	
City Zip	<b>E</b> M	30	

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGQ	Dina Helmadollar 5218 Dexter Street
	Orlando, Florida 32807
<del></del>	
	he date of filing: (OPTIONAL)
CLE V: Effective date, if other than the ffective date is listed, the date must days after the date of filing.)  the date inserted in this block does not meet at seffective date on the Department of States.	he date of filing: (OPTIONAL st be specific and cannot be more than five business date the applicable statutory filing requirements, this date will not be list
CLE V: Effective date, if other than the ffective date is listed, the date must days after the date of filing.)  the date inserted in this block does not meet at seffective date on the Department of States.	he date of filing: (OPTIONAL st be specific and cannot be more than five business date the applicable statutory filing requirements, this date will not be list
CLE V: Effective date, if other than the effective date is listed, the date must days after the date of filing.) the date inserted in this block does not meet at seffective date on the Department of State CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	he date of filing: (OPTIONAL st be specific and cannot be more than five business day et the applicable statutory filing requirements, this date will not be liste's records.
CLE V: Effective date, if other than the ffective date is listed, the date must days after the date of filing.) The date inserted in this block does not meet is effective date on the Department of State of the VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a member of a member of the provision	he date of filing:

ARTICLE IV-

Page 2 of 2