(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
	Office Use Or	J





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JUL 1 6 2015 T SCHROEDER

FLORIDA DEPARTMENT OF STATE Division of Corporations

July 1, 2015

DOMINGO DEJESUS ADAMES PO BOX 2875 RIVERVIEW, FL 33568

SUBJECT: ADAMES LAWN SERVICE LLC

Ref. Number: W15000044698

* Paver

We have received your document for ADAMES LAWN SERVICE LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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) 245-6052.

Terri J Schroeder Regulatory Specialist II

Letter Number: 315A00013760

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

· COVER LETTER

10;	Division of C				
SUBJEC		Lawn & Paver Services	LLC		
SOBILE	- 1: <u></u>	Name of	Limited Liabili	ity Company	
The encle	osed Articles o	of Organization and fee(s) are submitted	for filing.	
Please re	turn all corres	pondence concerning this	s matter to the f	following:	
	Domingo I	De Jesus Adames			
	*************************************		Name of	Person	
	Adames La	nwn & Paver Services Ll	LC		
			Firm/Co	mpany	
	11602 lvy	Flower Loop			
			Addre	ess	
	Riverview,	FL 33578			
	lisveth217@	gmail.com	City/State and	d Zip Code	
			sed for future a	nnual report notification)	
For further	information c	oncerning this matter, pl	ease call:		
	Domingo D	e Jesus Adames	813	570-0138	
	Nar	ne 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	Certifie	0 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Regis Divis P.O. I	ng Address tration Section ion of Corporations Box 6327 nassee, 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

	lity Company is:		
Adames Lawn & P			
(Must en	d with the words "Limite	d 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:
<u>Princi</u>	pal Office Address:		Mailing Address:
11602 Ivy Flower I	Loop	PO E	Box 2875
Riverview, FL 335		Rive	rview, FL 33568
RTICLE III - Registered A	gent, Registered Office.	& Registered Agen	t's Signature:
The Limited Liability Compar nother business entity with an	ny cannot serve as its own n active Florida registration	n Registered Agent. Yon.)	t's Signature: 'ou must designate an individual or
The Limited Liability Compar nother business entity with an	ny cannot serve as its own n active Florida registration	n Registered Agent. Yon.)	t's Signature: You must designate an individual or
The Limited Liability Compar nother business entity with an	ny cannot serve as its own n active Florida registration of address of the registere	n Registered Agent. Yon.)	t's Signature: You must designate an individual or
The Limited Liability Compar nother business entity with an	ny cannot serve as its own n active Florida registration of address of the registere	n Registered Agent. Yon.) d agent are:	t's Signature: You must designate an individual or
The Limited Liability Compar nother business entity with an	ny cannot serve as its own active Florida registration address of the registere Yadira Aponte 11602 Ivy Flower L	n Registered Agent. Yon.) d agent are:	ou must designate an individual or
ARTICLE III - Registered A The Limited Liability Compar mother business entity with an The name and the Florida stree	ny cannot serve as its own active Florida registration address of the registere Yadira Aponte 11602 Ivy Flower L	n Registered Agent. Yon.) d agent are: Name	ou must designate an individual or

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.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

15 JUL 16 PH 4: 02

Title:		Name and Address:	
"AMBR" = A	Authorized Member		
"MGR" = Ma	anager		
AMBR	· · · · · · · · · · · · · · · · · · ·	Domingo De Jesus Adames	
		11602 Ivy Flower Loop	
		Riverview, FL 33578	
MGR		Yadira Aponte	
MOR		11602 Ivy Flower Loop	-
		Riverview, FL 33578	
		Riverview, FL 33376	
	 		
			
ffective date is of filing.)	listed, the date must be sp	e of filing: (OPTIONAl pecific and cannot be more than five business days prior (to or 90 da
ffective date is e of filing.) If the date inser ument's effecti	listed, the date must be specified in this block does not we date on the Department rovisions, if any.	pecific and cannot be more than five business days prior of meet the applicable statutory filing requirements, this date tof State's records.	to or 90 da
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