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PICK-UP	MAIT	MAIL
(D.	- F. C. No.	
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: VMD Cleaning Service 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:
Vanessa De Jesus Name of Person
VMD Cleaning Sarvice LLC Firm/Company
D.O. box 541592 Address
City/State and Zip Code VMD Cleaning Service @ 19h00.com E-mail address: (to be used for-future annual report notification)
For further information concerning this matter, please call:
Vanessa De Jesus (56) 856-4183 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 Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

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

Street Address

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	T	Ί	C	L	E	I	-	N	a	me	:
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The name of the Limited Liability Company is:

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:

A Company of the Comp	إعبت	
Principal Office Address: Mailing Address:	ائن <u>حد</u>	arrier a
2393 S. Congress Ave. On Box 541592	8	* 9
Suite 200 Greenacres, FL 33454	ယ်	E. warmer
West palm beach, FL 33406	70	Sections:
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:		E THE
(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.)	>	* STREET,

The name and the Florida street address of the registered agent are:

West palm beach, FL 33406
State 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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. (OPTIONAL) re than five business days prior to or 90 days ory filing requirements, this date will not be 1
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representative of a member.
ction 605.0203 (1) (b), Florida Statutes.
representative of a member. ction 605.0203 (1) (b), Florida Statutes. a document to the Department of State

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-