## L15000147808

(Requestor's Name)	
(Address)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Business Emily Hame)	
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## COVER LETTER

	egistration Section vision of Corpora				
SUBJECT	GREEN	LEAF	CIEANING	services	LLC
ocusto.		Name	of Limited Liability Company		
The enclose	ed Articles of Orga	nization and fe	e(s) are submitted for filing.		
Please retu	m all corresponden	ce concerning t	this matter to the following:		
	CAR	MEN	AMALIA	ARROYO	
			Name of Person		
					<del></del>
		•	Firm/Company		
	1056	LONGS	TREET DR		
			Address		
	TA LLA	HASSE	E FL 327	311	
	CARME.	ARROY	E FL 37 City/State and Zip Code O E ME. CO	Μ	
_			e used for future annual report		
For further is	nformation concerr	ning this matter	, please call:		
-(	CARMEN	prody	0 850 <b>3</b> 12	-1366	
	Name of I	Person	Area Code Daytime T	Telephone Number	
Englocedic	a check for the fol	llowing amount			
\$125.00 Fi	ling Fee \$1	30.00 Filing Fe ertificate of Sta	e & \$155.00 Filing Fee	Certificate of S	Status &
	Mailing Ad	<u>ldress</u>	Street Addre	<del></del>	
	New Filing Division of	Section Corporations	New Filing S Division of C		
	P.O. Box 63	327	Clifton Build		

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

 LE I - Name: ne of the Limited Liabilit	ly Company is:			1.0
GREEN	LEAF	CLEANING	SERVICES L	LC
(Must end	with the words "Lir	nited Liability Company, "L.L.	C.," or "LLC.")	
LE II - Address: ling address and street a	ddress of the princi	pal office of the Limited Liabili	ty Company is:	
<u>Princip</u>	al Office Address:		Mailing Address:	<b>温</b>
1056 LONG	STEEET FL	DR 1056 20NG 32711 TAHA	STREET DR.	ZZI B

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:

Name

1056 LONG STEET DR

Florida street address (P.O. Box NOT acceptable)

TA-11A-11A-55 EE FL 32311

City 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 on provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED

(CONTINUED)

Page 1 of 2

AMBR" = Authorized Member MGR" = Manager	
AMBR	CHRMEN AMELIA APROY
AMBR	OMAR ROPPLAUEZ REYE
	MINTHUSSEC FL 32311
V: Effective date, if other than the date ctive date is listed, the date must be sp filing.)	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 d
EV: Effective date, if other than the date entire date is listed, the date must be sport filing.) The date inserted in this block does not ment's effective date on the Department.	need the applicable statutory filing requirements, this date will not b
EV: Effective date, if other than the date ctive date is listed, the date must be specifing.) the date inserted in this block does not ment's effective date on the Department EVI: Other provisions, if any.	need the applicable statutory filing requirements, this date will not b
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EV: Effective date, if other than the date ctive date is listed, the date must be specifiling.) The date inserted in this block does not ment's effective date on the Department EVI: Other provisions, if any.  REOUIRED SIGNATURE:  Signature of a many This document is exect I am aware that any false constitutes a third degree.	meet the applicable statutory filing requirements, this date will not be of State's records.  Tember or an authorized representative of a member.  The state of the description of the d
CV: Effective date, if other than the date ctive date is listed, the date must be sponding.)  The date inserted in this block does not bent's effective date on the Department CVI: Other provisions, if any.  Signature of a management of the document is exect I am aware that any false constitutes a third degree.	meet the applicable statutory filing requirements, this date will not be of State's records.  The most of a member

ARTICLE IV-

Page 2 of 2