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(Red	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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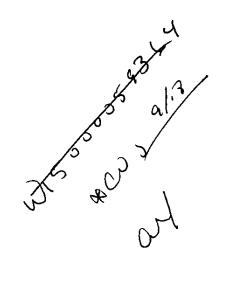
Office Use Only



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FILEU 2015 SEP 18 PHI2: 31



COVER LETTER

10:	Division of	Corporations			
SUBJE		on Services, LLC.			
	<u> </u>	Name o	f Limited Liabil	ity Company	
The enc	closed Article	s of Organization and fee(s) are submitted	for filing.	
Please r	eturn all com	respondence concerning th	is matter to the f	following:	
	Hildebra	ando Bohdert			
			Name of	Person	
	Brandon	Services, LLC			
			Firm/Co	mpany	
	650 Ken	wick Circle, Apt 202			
			Addr	ess	_
	Casselbe	erry, Florida 32707			
	hildebohd	lert@gmail.com	City/State an	d Zip Code	
		E-mail address: (to be	used for future a	nnual report notificati	on)
or furthe	er informatio	n concerning this matter, p	lease call:		
	Brandon		407 it (923-8867	
•]	Name of Person	Area Code	Daytime Telephon	e Number
Enclose	ed is a check	for the following amount:			
]\$125.00) Filing Fee	\$130.00 Filing Fee Certificate of Statu		00 Filing Fee & ed Copy al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Ne Di P.0	ailing Address we Filing Section vision of Corporations D. Box 6327 llahassee, FL 32314		Street Address New Filing Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	er Circle



September 9, 2015

HILDEBRANDO BOHDERT 650 KENWICK CIRCLE, APT 202 CASSELBERRY, FL 32707

SUBJECT: BRANDON SERVICES, LLC.

Ref. Number: W15000059364

We have received your document for BRANDON SERVICES, LLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The name and document number of conflict is, " P94000048427 - BRANDON SERVICE CORP."

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.

Letter Number: 015A00018963

Carol Mustain Regulatory Specialist II

www.sunbiz.org

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

The name of the Limited Liability	y Company is:				
Branc (Must end	vith the words "Limited	niec Se I Liability Company	rvices <u>fic</u>		
ARTICLE II - Address: The mailing address and street ad	ldress of the principal c	office of the Limited	Liability Company is:	•	
Princips	al Office Address:		Mailing Add	<u>'ess</u> :	
650 Kenwick Circle, Casselberry, Fl 3270			Kenwick Circle, Apt 202 selberry, FL 32707		
(The Limited Liability Company another business entity with an a The name and the Florida street a	ctive Florida registratio	on.) d agent are: t	You must designate an im	2015	produced
*	650 V Viale Circle	Name		SEVHYSS SELVEY 81 83	
,	650 Kenwick Circle Florida street addres		cceptable)	PH IZ:	
	Casselberry	Florida	32707	FIN N	ب
en e	City	State	Zip		
Having been named as registered a place designated in this certificate, further agree to comply with the pr am familiar with and accept the ob	I hereby accept the app ovisions of all statules r ligations of my pastion	ointment as register elating to the proper	ed agent and agree to act and complete performant is provided for in Chapter	in this capacity. I ce of my duties, and I	

Page 1 of 2

"AMBR" = Authorized	Member	Name and Address:
"MGR" = Manager	14741110-1	
MGR		Hildebrando Bohdert
	#916 # 9 *## # # #32	and the second s
ective date is listed, the	ther than the date of filing:	8-28-2015 (OPTIONAL) cannot be more than five business days prior to or 90
EV: Effective date, if o ective date is listed, the of filing.)	ther than the date of filing: date must be specific and block does not meet the a	cannot be more than five business days prior to or 90 pplicable statutory filing requirements, this date will not
EV: Effective date, if o ective date is listed, the of filing.)	ther than the date of filing: date must be specific and block does not meet the a the Department of State's	cannot be more than five business days prior to or 90 pplicable statutory filing requirements, this date will not
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E V: Effective date, if of ective date is listed, the of filing.) The date inserted in this ment's effective date on E VI: Other provisions, it is a series of the date on the constitution of the constitutio	ther than the date of filing: date must be specific and block does not meet the a the Department of State's fany. URE: gnature of a member or current is any false informaties a third degree felony a fildebrando Bohdert	pplicable statutory filing requirements, this date will not records. an authorized representative of a member. ordance with section 605.0203 (1) (b), Florida Statutes, ion submitted in a document to the Department of State

L15000157849

Night Auditors of America Inc. 7320 Farington Court Orlando, Florida 32819-4667

Friday, September 18, 2015

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Florida Department of State Division of Corporations Office of Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

RE: Written Consent For Use of Trade Name

To whom it may concern,

I, Jeffrey T. Weinland, PSTD for NIGHT AUDITORS OF AMERICA INC., do hereby grant written consent for Dennis S. Levy of Orlando, FL to use the trade name NIGHT AUDITORS OF AMERICA in forming a new Florida Limited Liability Company.

Sincerely

Jeffrey T. Weinland, PSTD

NIGHT AUDITORS OF AMERICA INC.

DOC # L86779

FEI/EIN # 59-3020358

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