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PICK-UP		
. (Busine	ess Entity Name)	
(Document Number)		
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T SCHROEDER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: George Janitori Name of Limited Li	al Service L.L.C.
The enclosed Articles of Organization and fee(s) are subm	itted for filing.
Please return all correspondence concerning this matter to	the following:
Albert 5. Gran	ne of Person
Firm	n/Company
1520 Oldenburg	Dr. Address
Jacksonville, Fl.	32218
Jack SDh Ville, Fl. City/Sta Hlbert. George 21. G E-mail address: (to be used for full	te and Zip Code / Loo . Com ure annual report notification)
For further information concerning this matter, please call:	
Albert Grorge at (904) Name of Person Area Con	de Daytime Telephone Number
Enclosed is a check for the following amount:	
☐ Certificate of Status ☐ Ce	\$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

The name of the Limited Liability Company is Gence Janitorial (Must end with the words "Limited Liability Company is	
(Must end with the words "Limited Lia	bility 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:
Principal Office Address:	Mailing Address:
1520 Oldenburg Dr. Jackson VIII: Fl. 32218	Same
ARTICLE III - Registered Agent, Register	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another

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

Albert J. George

Name

1520 Olden burg Dr.

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

Jackson V. He FL 32218

City 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

Name and Address:	
Albert J. George 1520 Oldenburg Dr. Jackson Ville Fl. 32218	
Laressia Rayborn 1520 Oldenburg Dr. Jackson ville FT 32218	
Xavier S. George 2938 Captiva Bluck Rd North Jacksonville El. 32225	
16111	
specific and cannot be more than five business day	s prior
ecords.	cu as the
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1 1	
r an authorized representative of a member rdance with section 605.0203 (1) (b), Florida Statutes on submitted in a document to the Department of State provided for in s.817.155, F.S.	3: 23
l or printed name of signee	
	Albert J. Grorge IS20 Diden burg Dr. Jickson V. II. F. 32218 Laressia Ray born 1520 Olden burg Dr. Jackson v. II. F. 32218 Xavier J. Grorge 2938 Captiva Bluff Rd North Sackson v. II. F. 32225 Ackson v. II. Forida Statutes F. Sackson v. II.

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

\$ 5.00 Certificate of Status (Optional)
Page 2 of 2

The name and address of each person authorized to manage and control the Limited Liability

ARTICLE IV-