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COVER LETTER

	Registration Section Division of Corporations	•	
SUBJECT	T: GWT Cleaning S Name of Limited Lin	Services, LLC ability Company	
The enclose	sed Articles of Organization and fee(s) are submit	tted for filing.	
Please retu	urn all correspondence concerning this matter to t	he following:	
	Gerald W. Torre	S of Person	
	GWT Cleaning Se	• •	
	952 Cottonbay	or, E Apt 1903 ddress	
	West Palm Boach F City/State	L. 33406 e and Zip Code	
	<u>gwtorres Papo@gmail.</u> E-mail address: (to be used for futu	Com re annual report notification)	
For further	information concerning this matter, please call:		
	Gera d Torres at 501 Name of Person Area Cod) 827-4780 e Daytime Telephone Number	
Enclosed i	is a check for the following amount:		
\$125.00 F	Certificate of Status — Ce	\$5.00 Filing Fee & \$160.00 Filing Certificate of Scional copy is enclosed) Certified Copy (additional copy	Status &
	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	15 NOV 16 PM



15 NOV 16 PM 12: 31

FLORIDA DEPARTMENT OF STATE Division of Corporations

October 30, 2015

GERALD W. TORRES 952 COTTONBAY DRIVE E APT. 1903 WEST PALM BEACH, FL 33406

SUBJECT: GWT CLEANING SERVICES, LLC

Ref. Number: W15000071931

We have received your document for GWT CLEANING SERVICES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the city name in its entirety abbrevication is not acceptable.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of 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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 615A00023039

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	15 NOV 16 PH 3. 24
GWT Cleaning Services, LLC	CORETARY OF STATE
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	T TALLAH A SCEE, FLORIDA
ARTICLE II - Address;	
The mailing address and street address of the principal office of the Limited Liability Company is:	

FILED

<u>Principal Office Address:</u>	Mailing Address:
952 CoHon Bay Dr. E. \$1903	452 CoHon Bay Dr. E. # 1903 West palm Beach, FL. 33406
Wast Palm Beach, FL 33406	HEST Palm Beach, FL. 33406

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:

ARTICLE I - Name:

Gera	1d 1	J. Torr	es	
		Name		
95	2 Cot	Hon Bay	Dr. E.	#1903 able)
Floridas	treet addre	ess (P.O. Box N	OT accepta	able)
West	Falm	Beach	FL.	
	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 as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

e: MBR" = Authorized GR" = Manager	Member	Name and Address:		
	-			

e attachment if nece	ssary)			
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