

L 15000 197196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

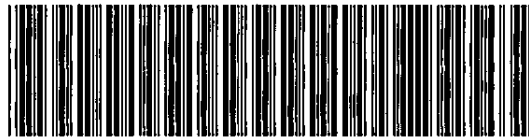
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100279070461

11/16/15--01007--007 **130.00

APPROVAL
AND
FILED

15 NOV 16 PM 3:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14

TO: Registration Section
Division of Corporations
New Filing Section
PO Box 6327
Tallahassee, FL 32314

Subject: Extreme Clean Solutions LLC

The enclosed Articles of Organization and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Laura A. Manserra
1821 SE 3rd Avenue
Ocala, FL 34471

Email: laura.manserra@gmail.com

For further information concerning this matter, please call:

Laura A Manserra at (352) 497-2112

Enclosed is a check in the sum of \$130.00 as filing fee and certificate of status.

**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

APPROVED
AND
FILED

15 NOV 16 PM 3:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I – Name:

The name of the Limited Liability Company is:

Extreme Clean Solutions LLC

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

1821 SE 3rd Avenue
Ocala, FL 34471

Mailing Address:

1821 SE 3rd Avenue
Ocala, FL 34471

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:

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

Antonio Manserra
3665 SE 19th Avenue
Ocala FL 34471

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 608, F.S.


Antonio Manserra, Registered Agent

ARTICLE IV – Managing Member:

The name and address of the sole Managing Member is as follows:


<u>Title:</u>	<u>Name and Address:</u>
MGRM	Laura A. Manserra 1821 SE 3 rd Avenue Ocala, Florida 34471

15 NOV 16 PM 3:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

ARTICLE V – Effective Date:

The effective date shall be the date of filing hereof.

REQUIRED SIGNATURE: 
Laura A. Manserra,
Managing Member

(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)