Figure 1 Corporations Figure 1 Constraint C

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000060138 3)))



H160000601383ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

(850)617-6381

From:

Account Name : CORP USA
Account Number : 072450003255
Phone : (305)634-3694

Fax Number : (305)633-9696

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

FLORIDA LIMITED LIABILITY CO. OFFICE CLEANERS L.L.C.

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

107659

Electronic Filing Menu

Corporate Filing Menu

ASU9ADO

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

9696889908

03/08/5010 10:10

03/07/2016

And manager Have no Entention

OF Remstating OFFice Cleaners

LLC. COCUMENT Number L140000725.

35. instead Im opening a new

LLC. business with a new LLC called

"DFFice Cleaners L.L.C."

Bown + Skel

COVER LETTER

H16000060138

 (λ)

TO: Registration Section Division of Corporations

SUBJECT: OFFICE Cleaners L.L.C.

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

Please return all correspondence concerning this matter to the following:

Name of Person

DEFICE, Clasurers

Firm/Company

549 Hills dayo Ave w-w

Address

Palm BAG El: 32907

City/State and Zip Code

JAMES 0388 Challs outhored

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SAMOS HUNTA et (321) 987-0574

Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee & \$130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certificate of Status & Certificate of St

(additional copy is enclosed) Certified Copy
(additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

16 HAR -9 PHI2: 01

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

OFFICE Eleanors L.L.C.
(Must end with the words "Limited Liability 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: Malling Address:

Sug Hills date AND SAME!"

LAJM BAYFL 32007

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:

JAMOS THUNTER

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

PAIM BAY FL 3240)

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.

(CONTINUED)

sistered Agent's Signature (REQUIRED)

Page 1 of Z

	ARTICLE IV- The name and address of each person au	RTICLE IV- he name and address of each person authorized to manage and control the Limited Liability Company:		
	Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:		
Цвr	James Hunty	cag Hill date ave		
	(Use attachment If noocssary)			
(if the	RTICLE V: Effective date, if other than the date as effective date is listed, the date must be speed ate of filing.) RTICLE VI: Other provisions, if any.	of filing:(OPTIONAL) seiffic and cannot be more than five business days prior to or 90 days after		
	REQUIRED SIGNATURE:			
	(In secondance with section of constitutes an affirmation in I am aware that any faitse in constitutes a third degree fe	mber or an authorized representative of a member. 505.0203 (1) (b), Florida Stantes, the execution of this document inder the penalties of perjury that the facts stated herein are true, formation submitted in a document to the Department of State clony as provided for in s.8/7.155, F.S.) M. G.S. Typed or printed name of signee		
	\$125.00 Filing Fee for Articles of Org \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Option	Filing Feps: gauization and Designation of Registered Agent ai)		

Page 2 of 2

18 HAR -8 PM 12: 01