

L16000060899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

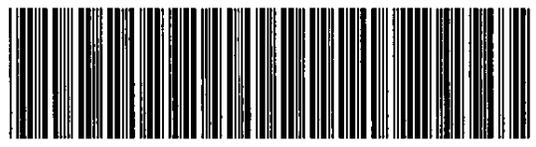
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Letter 9) Please enclose

Office Use Only



600283590446

03/22/16--01018--020 **130.00

FILED
16 MAR 22 PM 2:17
TALLAHASSEE, FLORIDA
STATE

MAR 2 2016
S. GILBERT

enitia corporation

EMPOWERING AMERICA'S ENTREPRENEURS

Enitia Corporation

315 West Huron, Suite 240

Ann Arbor, MI 48103

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

March 14, 2016

Re: Extreme Steam Cleaning Services LLC

Dear Sir or Madam:

Enitia Corporation has been authorized by Ryan Felts to file the enclosed Articles for Extreme Steam Cleaning Services LLC.

If you need any additional information, you can reach us at

1-877-281-6496 (toll free)
documents@directincorporation.com

We have enclosed an additional \$5.00 for one "Certificate of Status". For your convenience, I have enclosed a self-addressed envelope.

Thank you,

Ed Stahlin
Enitia Corporation

EMPOWERING • AMERICA • ENTREPRENEURS

Enitia Corporation

115 West Burns, Suite 240

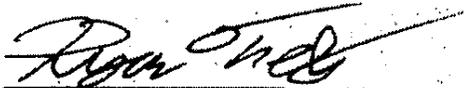
Ann Arbor, MI 48103

March 10, 2016

Dear Sir or Madam,

Enitia Corporation has been authorized by Ryan Felts to file Articles of Organization for Extreme Steam Cleaning Services LLC. The incorporation, Extreme Steam Cleaning Services LLC was incorporated by Ryan Felts in March 2014. The document number is: L14000038859. The client Ryan Felts gives his consent to re-register his company under the name. He has no intention to reactivate his old company.

Thank you,



Ryan Felts, Member

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Extreme Steam Cleaning Services LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Edward Sthalin
Name of Person

Direct Incorporation
Firm/Company

315 W Huron St, STE 240
Address

Ann Arbor, MI 48103
City/State and Zip Code

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

For further information concerning this matter, please call:

Edward Sthalin at (877) 281-6496
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) \$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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Extreme Steam Cleaning Services LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

FILED
16 MAR 22 PM 2:17
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

8109 18th Ave. E.
Palmetto, FL
34221

8109
Palmetto, FL
34221

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:

Ryan Felts

Name

8109 18th Ave. E.

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

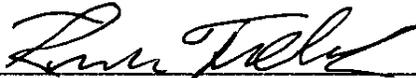
Palmetto FL 34221

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)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGRM

Name and Address:

Ryan Felts

8109 18th Ave. E.

Palmetto, FL 34221

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Ryan Felt

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)