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## **COVER LETTER**

	Registration Section Division of Corporations		
SUBJECT	West Lakes Property Services, LI	.c	
SOBILO		Limited Liabili	y Company
The enclos	sed Articles of Organization and fee(s	) are submitted	or filing.
Please retu	urn all correspondence concerning this	s matter to the fo	llowing:
	Faye Coleman-Giddens		
		Name of 1	Person
	West Lakes Property Services, LLC		
		Firm/Cor	npany
	2200 Lake Sunset Drive		
		Addre	SS
	Orlando, Florida 32805		
	fac1944043@ac1.com	City/State and	Zip Code
	fcol866962@aol.com  E-mail address: (to be u	sed for future ar	nual report notification)
For further i	information concerning this matter, pl		•
	Faye Coleman-Giddens	321	438-6698
	Name of Person	Area Code	Daytime Telephone Number
Enclosed i	s a check for the following amount:		
\$125.00 F	iling Fee \$130.00 Filing Fee & Certificate of Status	Certifie	Stiling Fee & Status & Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	_	Street Address
	New Filing Section Division of Corporations		lew Filing Section Division of Corporations
	P.O. Box 6327	(	Clifton Building
	Tallahassee, FL 32314	2	661 Executive Center Circle

Tallahassec, FL 32301

## 'ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

he name of the Limited Lia	ibility Company is:			S.
				Ē
West Lakes Prop	erty Services, LLC			
(Must	end with the words "Limite	d Liability Company,	"L.L.C.," or "LLC.")	200
				(1) ====================================
RTICLE II - Address:	at adduses of the maineline.	affina af tha Limitad I	inhility Commony in	<u> </u>
ne maning address and sire	eet address of the principal	office of the Limited I	Liability Company is:	30
<u>Pri</u>	ncipal Office Address:		Mailing Address:	
2200 Lake Sunse	et Drive			
Oalamda Etanida	22005			
	Agent, Registered Office			or
RTICLE III - Registered The Limited Liability Composite business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration	n Registered Agent. Y on.)	e's Signature: ou must designate an individual	or
RTICLE III - Registered The Limited Liability Composite business entity with	Agent, Registered Office, pany cannot serve as its own	n Registered Agent. Y on.)		or
RTICLE III - Registered The Limited Liability Composite business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration reet address of the registere	n Registered Agent. Y on.) d agent are:		or
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RTICLE III - Registered The Limited Liability Composite business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration reet address of the registere  Faye Coleman-Gidd  2200 Lake Sunset D	n Registered Agent. Y on.) d agent are: lens Name	ou must designate an individual	or
RTICLE III - Registered The Limited Liability Composite business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration reet address of the registere  Faye Coleman-Gidd  2200 Lake Sunset D	n Registered Agent. Y on.) d agent are: lens Name	ou must designate an individual	or

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)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Erro Colomo Ciddon
AMBR	Faye Coleman-Giddens 2200 Lake Sunset Drive
	Orlando, Florida 32805
	Oriango, Florida 32803
ective date is listed, the date must be of filing.)	date of filing: (OPTIONAL)  e specific and cannot be more than five business days prior to or 90 da  not meet the applicable statutory filing requirements, this date will not be
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ARTICLE IV-

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