Division of Corporations Electronic Filing Cover Sheet

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FLORIDA LIMITED LIABILITY CO. JOHN'S QUALITY SERVICE, LLC

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P. 001

Electronic Filing Menu

Corporate Filing Menu

Help

AR	TICLES OF ORGANIZATIO	N FOR FLORID	A LIMI	TEDLIABILI	Y COMPANY	•		
ARTICLE I - Name: The name of the Limit	ed Liability Company is:							
John's Quality S								
(1	Must end with the words	"Limited Liabilit	у Сол	pany, "L.L.C.	," o u "LLC.")			
ARTICLE II - Addre The mailing address an	ess: and street address of the pr	incipal office of	the Lir	oited Liability	Сопрану іє;			
Principal Office Add	<u>ress:</u>	Mailing Add	1695;					
8010 SW 152nd A Miami, FL 33193	Ave, Unit # 202			V 152nd Av L 33193	re, Unit#20	02		
(The Limited Liability another business entity	itered Agent, Registered Company cannot serve a y with an active Florida re ida street address of the r	its own Registe gistration.)	red Ag	Agent's Sign ent. You must	sture: : designate an	indiyidu	al or	
THE DRING SHOTTHE CLOS			10.		•			
	John Carlos Este	Name			-			
	8010 SW 152nd A	Ave Unit#20	2					
	Florida street address (bia)	_			
	Mlami	FI	-	33193				
	City			Zip	_			
the place designate capacity. I further a	is registered agent and to deed in this certificate. I here gree to comply with the prain familiar with and acceptant Registered Agen	by accept the apportions of all super the obligation. Chapter 605,	pointm atules t s of my F.S	ent as register elating to the p position as re	ed agent and a proper and co	igree to d mplete pe	ict in thi Oforma	is nce
,	(CC	NTENUED)				SEC	ਲ	aranzsa <u>i</u> ja
·	·	Page 1 of 2				RETARY OF S	MY 24 PM 4	Paris Comments

Thle: "AMBR" = Authorized Memb	Name and Address:
"MGR" = Manager	
AMBR	Elizabeth Estevanell
	8010 SW 152nd Ave, Unit # 202
	Miami, FL 33193
·	
(Use attachment if necessary)	in the date of filing: 05/18/2016 (OPTIONAL)
E VI: Other provisions, if any.	
E VI: Other provisions, if any.	
E VI: Other provisions, if any. REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	Titevanell
REOURED SIGNATURE: Signatur (In accordance wit constitutes an affirm any are that at	re of a member or an authorized representative of a member. h section 605.0203 (1) (b), Florida Statutes, the execution of this document rmation under the penalties of perjury that the facts stated herein are true. ay false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.)
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