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COVER LETTER

	iew Filing Section Division of Corporations
SUBJECT	AL'S CARPET CLEANING & PRESSURE WASHERS
SUBJECT	Name of Limited Liability Company
The enclos	sed Articles of Organization and fee(s) are submitted for filing.
Please retu	rm all correspondence concerning this matter to the following:
	VERCIUS ALMONOR
	Name of Person
	AL'S CARPET CLEANNING & PRESSURE WASHERS
	Firm/Company
	4202 16TH ST SW
	Address
	LEHIGH ACRES, FL 33976
	City/State and Zip Code verciusa@gmail.com
	E-mail address: (to be used for future annual report notification)
For further i	nformation concerning this matter, please call:
`	VECCUS AlmonoR at (239) 88-5202 Name of Person Area Code Daytime Telephone Number
Enclosed is	s a check for the following amount:
]\$ 125.00 F	sling Fee S130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallabasean Fl. 323112661 Francision Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

AL'S CARPET CLEANING & PRESSURE WASHERS LLC

(Must contain the words "Limited Liability Company, "L.I.,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:	Mailing Address:
4202 16TH ST SW LEHIGH ACRES, FL 33976	4202 16TH ST SW
	LEHIGH ACRES, FL 33976

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:

VERCIUS ALMONO	, SECI ALL.		
	AH, UG		
4202 16TH ST SW			Sign #
Florida street address	(P.O. Box <u>NOT</u> acce	ptable)	
LEHIGH ACRES	FLORIDA	33976	
City	State	Zip	23 Al 6 RIBA

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:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	VERCIUS ALMONOR 4202 16TH ST SW LEHIGH ACRES, FL 33976
MGR	MARIE GORETHY MOMBRUN 2914 12TH ST SW LEHIGH ACRES, FL 33976
(Use attachment if necessary)	
(If an effective date is listed, the date must be sp the date of filing.)	of filing: 07/25/2017 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days after neet the applicable statutory filing requirements, this date will not be listed as of State's records.
REQUIRED SIGNATURE:	TALL.
This document is execu I am aware that any false	ember or an authorized representative of a member. Ited in accordance with section 605.0203 (1) (b). Floridation submitted in a document to the Department of State of Felony as provided for in s.817.155, F.S.
	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)