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# COVER LETTER

TO:	New Filing Section Division of Corporations		
CHD III	On-Site Integrated Services, LLC.		
SUBJE	Name of	mited Liability Company	
The enc	closed Articles of Organization and fee(s)	re submitted for filing.	
Please r	eturn all correspondence concerning this	atter to the following:	
	Hugo Ontaneda		
		Name of Person	-
	On-Site Integrated Services, LLC.		
	<del></del>	Firm/Company	
	700 Twin Creek En. Apt 342		
		Address	
	Heathrow, FL 33442		
	daviczion@gmail.com	City/State and Zip Code	
	E-mail address: (to be us	d for future annual report notification	on)
For furthe	er information concerning this matter, ple	se call:	
	Hugo Ontaneda at :	598-0336 )	
	Name of Person	Area Code Daytime Telephone	Number
Enclose	ed is a check for the following amount:		
\$125.00	0 Filing Fee S130.00 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 Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	· Circle

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

On-Site Integrated S			
(Must cor	ntain the words "Limited Li	iability Company,	"L.L.C" or "LLC.")
ARTICLE II - Address: The mailing address and street	address of the principal off	ice of the Limited	Liability Company is:
Princi	pal Office Address:		Mailing Address:
700 Twin Creek Ln	i, Apt 342	700	Twin Creek Ln, Apt 342
(The Limited Liability Compan	gent, Registered Office, & y cannot serve as its own R	Registered Ager	hrow, Fl. 32746  it's Signature: You must designate an individual o
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	gent, Registered Office, & ry cannot serve as its own R active Florida registration t address of the registered a	Registered Ager Registered Agent. \	it's Signature:
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	gent, Registered Office, & sy cannot serve as its own R active Florida registration taddress of the registered a	Registered Ager Registered Agent. \	it's Signature:
ARTICLE III - Registered A	gent, Registered Office, & sy cannot serve as its own R active Florida registration taddress of the registered a	Registered Ager Registered Agent. \( \) agent are: Name	it's Signature:
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	gent, Registered Office, & sy cannot serve as its own Reserve Florida registration taddress of the registered a	Registered Agent. Solution of the Registered Agent. Solution of the Registered Agent. Solution of the Registered Agent are:  Name  Apt. 342	nt's Signature: You must designate an individual c
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	gent, Registered Office, & sy cannot serve as its own R active Florida registration taddress of the registered a Hugo Ontaneda	Registered Agent. Solution of the Registered Agent. Solution of the Registered Agent. Solution of the Registered Agent are:  Name  Apt. 342	nt's Signature: You must designate an individual o

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:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager	Union Chatronia lo		
Manager	Hugo Ontaneda 700 Twin Creek Ln, Apt 342		
	Heathrow, FL 32746		
	Headilow, PL 32740		
Manager	Victor Ontaneda		
	741 Stone Oak Drive		
	Sandford, FL 32771		
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(Use attachment if necessary)	ORIDE	_	
ARTICLE V: Effective date, if other than the date of filing:		2	
If an effective date is listed, the date must be specific and the date of filing.)  Note: If the date inserted in this block does not meet the a the document's effective date on the Department of State's	d cannot be more than five business days prior to or 90 applicable statutory filing requirements, this date will no		
ARTICLE VI: Other provisions, if any.			_
			-
REOUIRED SIGNATURE:			
Hyan	Ontoneda		
Signature of a member or This document is executed in acc	<ul> <li>an authorized representative of a member.</li> <li>cordance with section 605.0203 (1) (b). Florida Statutes.</li> <li>ation submitted in a document to the Department of State</li> </ul>		
Hugo Ontaneda			
	or printed name of signee		
* 1	•		

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# 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)