L18000021461

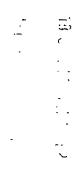
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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W18-2371



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 9, 2018

JOHN MORRIS MORRIS CLEANING SERVICES 9909 FAIRWAY CIRCLE LEESBURG, FL 34788

SUBJECT: MORRIS CLEANING SERVICES LLC.

Ref. Number: W18000002371

We have received your document for MORRIS CLEANING SERVICES LLC. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L17000249144.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE Regulatory-Specialist II

Letter Number: 718A00000581

COVER LETTER

TO: New Filing Section Division of Corporations WOCCIS Home Cleaning Services LLC
SUBJECT: Morris 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:
John Morris
Morris Home Cleaning Services UC Morris Cleaning Services UC
Firm/Company
1909 Fairway Circle
Leisburg FL 34788 City/State and Zip Code MUTTIS 8200/jve. Com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
John Morris at (732) 778-23/2 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate Opy (additional copy is enclosed)} \text{\$\text{\$\subset}\$\$} \text{\$\text{\$\subset\$\$\subset\$\$\text{\$\subset\$}\$}\$ \text{\$\text{\$\subset\$\$\text{\$\subset\$}\$}\$ \text{\$\text{\$\subset\$}\$}\$ \$\text{\$\sub
Mailing Address Street Address
New Filing Section New Filing Section Division of Corporations Division of Corporations

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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: Morris Home Cleaning Services LL. (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
Marcia Chamin Services LLC.
(Must contain the words "Limited Liability Company, "L.L.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:
1909 Fairway Circle Cees Ling FL 134788 Lees Ling FL 34788 Lees Ling FL 34788
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:
John Morris Name
Florida street address (P.O. Box NOT acceptable)
Florida street address (P.O. Box NOT acceptable)
Lees by FL 34788 City State Zip
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 statuter relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as negistered agent as provided for in Chapter 605, F.S Registered Agent's Signature (REQUIRED)
(CONTINUED)

MBR" = Authorized Member GR" = Manager MGR	John Morris 9909 Firmay Circle Leesbirg FL 34788 Anastasia Morris 9909 Firmay Grile Leesbirg FL 34788
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	9909 Firmby Grile 1066575 FL 34788
	1066 JG FL 34788
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nt's effective date on the Department of	State's records.
/I: Other provisions, if any.	
OWDED SIGNATURE \	
OUIRED SIGNATURE	
OUIRED SIGNATURE	
Signature of a mem	ber or an authorized representative of a member.
Signature of a mem This document is executed	I in accordance with section 605.0203 (1) (b), Florida Statutes.
Signature of a mem This document is executed I am aware that any false in	I in accordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State
Signature of a mem This document is executed I am aware that any false in constitutes a third degree for	I in accordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.
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The name and address of each person authorized to manage and control the Limited Liability Company: