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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: PATTERSON COMMERCIAL CUEANING SERVICES 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:
ROBERT C. PATTERSON Name of Person
Name of Person
725 SPARKIEBERY BIND
225 SPARKIEBERY BLUD QuiNcy FL 3235/
Address
Constitution of The Code
City/State and Zip Code PASTELSONR 41@ GMAIL - COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
To Turner information consorting and manage promise
at ()
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$130.00 Filing Fee & Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section Street Address New Filing Section
Division of Corporations Division of Corporations
P.O. Box 6327 Tallahassee, Fl. 32314 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 C	ompany is:						
PATTERSON	COMMERCI	AL CLEAN	ING SERVICE	5, LLC			
(Must contain	the words "Limited I.	.iability Company	, "L.L.C.," or "LLC).")			
ARTICLE II - Address: The mailing address and street address	ess of the principal of	ffice of the Limite	d Liability Compan	y is:			
Principal (Office Address:		Mailin	g Address:			
725 SPARKE	EREPRY LIVE)	P.O. 70X	1352			
QUINCY A	32351		QUINCY, FL	32353			
	<u> </u>		<u> </u>				
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an acti The name and the Florida street ade	nnot serve as its own ve Florida registratio dress of the registered T25 Florida street addres	Registered Agen on.) I agent are: C. PATTER Name SPARKUEB SS (P.O. Box NO)	SON ELLY BLUL Cacceptable)	<u></u>	SECRETARY OF STAT	21年 NAY 31 PH 2:3	
•	QuiNey	PL	3235	/	Kirr:	Œ	
	City	State	3235 Zip				
Having been named as registered ag place designated in this certificate, I further agree to comply with the provam familiar with and accept the oblig	eni and to accept serv hereby accept the app visions of all statutes r gations of my position	vice of process for pointment as regis relating to the pro a as registered age	the above stated lim tered agent and agre per and complete pe	ited liability comp re to act in this cap rformance of my d Chapter 605, F.S	vacuy. i luties, and		

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	_
"MGR" = Manager MGL	ROBERT PATTERSON
7.192	725 SPARKLEBERRY BLUD RUINCY FL 32331
	QUINCY, FL 32331
EV: Effective date, if other than the datective date is listed, the date must be set [1]	te of filing: 06/01/2018 (OPTIONAL) specific and cannot be more than five business days prior to or 90 d
fective date is listed, the date must be soffiling.) If the date inserted in this block does no	specific and cannot be more than five business days prior to or 90 d t meet the applicable statutory filing requirements, this date will not b
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ARTICLE IV-