L18000 51922

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(Cit	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
(Do	ocument Number)	 ,
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
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2018 JUN 15 AM 11: 05
SECRETARY OF STATE
TALLAHASSEE, FLOSID.



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 26, 2018

ERIK T. GROFF 409 LOMA LINDA ENGLEWOOD, FL 34223

SUBJECT: CREATIVE ENVROMENTAL SOLUTIONS, LLC.

Ref. Number: W18000039411

2018 JULI 15 PH 2: 18

We have received your document for CREATIVE ENVROMENTAL SOLUTIONS, 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.

P94000023120-CREATIVE ENVIROMENTAL SOLUTIONS, INC.,

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

Please return the corrected original and one copy of 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.

Tyrone Scott
Regulatory Specialist II
New Filings Section

www.sunbiz.org

Letter Number: 518A00008622

To whom it may concern,

This is an amended/revised cover letter intended to reflect necessary changes in the designated LLC name which was found to be in conflict with a preexisting entity.

It is hereby requested that (L16000186009) the relevant entity for this filing henceforth be documented as:

MAGPI ENVIRONMENTAL SERVICES, LLC.

This is intended to correspond with the requirements set forth in Letter number: 518A00008622. (4-26-18)

As manager, I would like to apologize for any inconvenience, and am available to deal directly with any further requests or issues.

Thank you!

Erik T. Groff 409 Loma Linda Englewood, Fl.

34223

941.445.1900

To whom it may concern.

Magpi Environmental Services, LLC.

This cover letter is hereby submitted on behalf of Creative Environmental Solutions LLC. (1.16000186009, effective 10-06-16), in order to ensure full compliance with regard to the documents listed as necessary for the processing of the aforementioned corporation's articles/status. Please find enclosed a check in the amount of \$160.00.

As Manager, I am available to deal directly with any inquiries/requests via the information supplied below. Please feel free to contact me anytime.

Thank you!

Erik T. Groff 409 Loma Linda Englewood, FL. 34223

941.445.1900

20kgl

COVER LETTER

	w Filing Section vision of Corporations			
	MAGPI ENGLISSIE ENVIROND	الماليسية	gervices	
SUBJECT:				-C·
	Name of	Limited Lia	bility Company	
The enclose	d Articles of Organization and fee(s) are submitt	ed for filing.	
Please retur	n all correspondence concerning this	s matter to th	e following:	
	Erik	T. 0	troff	·
	MAGRI	Name	of Person	Services
	CHERTHAR	Envi	ronmental &	Services WHIMS, LLC.
			Company	
	409 4	oma Ci	ndA	
		Ac	ldress	.
	Englewood,	FL	. 3422.	3
	Englewood, Groff stud	City/State	and Zip Code 3 MAi \ . c • M	
_	E-mail address: (to be t	ised for futur	re annual report notificat	tion)
For further in	formation concerning this matter, p	lease call:		
	Tanana (Calanana)			
٠	Name of Person		Daytime Telephor	
	(value of r ergi/ii	Anea Cour	. Daytine receptor	ac (within)er
Enclosed is	a check for the following amount:			
\$125.00 Fi	ling Fee S130.00 Filing Fee Certificate of Status	; LLCer	55.00 Filing Fee & tified Copy ional copy is enclosed)	\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address	
	New Filing Section Division of Corporations		New Filing Section Division of Corporal	tio ns
	P.O. Box 6327		Clitton Building	
	Tallahassee, FL 32314		2661 Executive Cen	ier Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

MARI	is:		Services	
antorise (Environn	nental	BUSINES, LLC	•
. (Must contain the word	ls "Limited Lic	ibility Company	"L.T.L.C.," or "LLC.")	•
ARTICLE II - Address: The mailing address and street address of the	e principal offi	ce of the Limite	d Liability Company is:	
Principal Office A	<u>ddress</u> :		Mailing Address:	
409 Long Lind	4		P.O. Box 34	
Englewood, FL	•		Englewood, FL.	
34223			34293	
The many and the Wheida eternit addrage of t	ha ragistarad a	ant are:		
The name and the Florida street address of t	he registered a	gent are: // GV/	ff	
The name and the Florida street address of t	he registered a EV 409 U	gent are; VIK GVA Name OMA CI	nda	
	409 L	gent are: /ik GV Name OMA LI P.O. Box NOT		
. Florida	409 L street address (Name OMA CIO P.O. Box NOT	acceptable)	
. Florida	409 L street address (Name OMA CIO P.O. Box NOT		
Florida : Engle Laving been named as registered agent and to blace designated in this certificate, I hereby actuarither agree to comply with the provisions of	HO9 L street address (LWOOD City D accept service except the appointall statutes relatives	Name OMA CI P.O. Box NOT FC State of process for intment as regist uting to the prop	acceptable) 34-223 Zip he above stated limited liability compered agent and agree to act in this caper and complete performance of my descriptions.	pacity. I luties, and
. Florida	HO9 L street address (LWOOD City D accept service except the appointall statutes relatives	Name OMA CI P.O. Box NOT FC State of process for intment as regist uting to the prop	acceptable) 34-223 Zip he above stated limited liability compered agent and agree to act in this caper and complete performance of my descriptions.	pacity. I luties, and

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ECHETARY OF ST

JUN 15 AM II:

Title: "AMBR" = Authorized Member "MGR" = Manager "MGR	Trial	Name and Addr	ace:
"MGR" = Manager "MGR" = Manager "MGR"			CD.
(Use attachment if necessary) (Use attachment if necessary) (Use attachment if necessary) (Use attachment if necessary) (ICLE V: Effective date, if other than the date of filing: (OPTIONAL) (O		20.02#	
Tereory A. Lieberman [633 29 fth Avg. N. St. Peters 7 ft. 33713] [ICLE V: Effective date, if other than the date of filing:	·MGB	-· Erik	
(Use attachment if necessary) (Use attachment if necessary) (ICLE V: Effective date, if other than the date of filing:			
(Use attachment if necessary) FICLE V: Effective date, if other than the date of filing:		<u>engla</u>	.wood, F.L. 34223
(Use attachment if necessary) FICLE V: Effective date, if other than the date of filing:	"MGR"	Terem	1 A. Lieberman
(Use attachment if necessary) FICLE V: Effective date, if other than the date of filing:		(633	29th Ave. N.
PICLE V: Effective date, if other than the date of filing:		St. Pete	Crs 482 FL. 33713
REOURED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605,0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.			· J,
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E: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. FICLE VI: Other provisions, if any. Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S. EVIL T: Group of the provisions of the provision of the	TCLE V: Effective	e date, if other than the date of filing:	(OPTIONAL)
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The name and address of each person authorized to manage and control the Limited Liability Company:

Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)