Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Enail	Address:			

FLORIDA LIMITED LIABILITY CO. MARVIN'S HOME SERVICES, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

Florida Department of State

Attention: New Filings Section

To whom it may concern:		•						
This is to advise that the owners of								
<u>Marvin's</u>	Home	services (_لر					
of Document #L 1 000 178 29 7								
are the same owners of the attached	articles. We have	dissolved the com-						

are the same owners of the attached articles. We have dissolved the company and have no intention of reopening it.

Thank you for your help in this matter.

Thanks,

Marvin J Vanegas

2019 SEP 10 AM 11: 54 SECRETARY OF STATE 88/18/2017 16:81 3852201448

LAZARUS

PAGE 83/84

ARTICLES OF ORGANIZATION

ARTICLE I - Name:	
The flame of the Limited Liability Company is: new end with the words "Limited Liability Company,"	
Marvins Home services, uc	
ARTICLE II - Address.	
The realing address and street address of the principal office of the Limited Liability	
26017 NW 27Th AVE	
1107	•
Miami FL 33147	
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limited Liability Company connot serve as its storn Registered Agent, You must designate an Individual or another business entity with an scribe Florida registration.) MAYVIN J VANEGAS 2007 N.H. 277h RVE	
1107	
Migmi FL 33147	
ARTICLE IV- The name and title of each person authorized to manage and control the Limited Liability Company:	
Marvin J Vanegas (AMBR)	
SECRETARY OF STATE AND SEE, FI	
Page 1 of 2	0

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09/19/2017 15:01

3052281440

LAZ4RLIS

PAGE 84/04

Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

Typed or printed name of sighee

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)

2018 SEP 10 AN 11: 54 SECRETARY OF STAT