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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO: New Filing Section

| Divi | sion of Corporations | • |
|------------------|---|--|
| SUBJECT: | TOP of the line Name of Limited | he Cleaning Service Lh |
| | Articles of Organization and feets) are su | |
| Please return | all correspondence concerning this matter | to the following: |
| | Tenia Hund | Tame of Person |
| _ | · | |
| ب | 2247 Noyà | Creck Rd |
| 1 | Montice no F | 1a 32344 State and Zip Code |
| _ | emal runtley. | future annual coort notification) |
| For further info | ormation concerning this matter, please ca | II: |
| 1 | Person Name of Person Area | 50, 688-4209 |
| Enclosed is a | check for the following amount: | |
| \$125.00 Filin | Certificate of Status | \$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy additional 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 Corporations |
| | P.O. Box 6327 | Clifton Building |
| | Tallahassee, FL 32314 | 2661 Executive Center Circle |

Tailahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ٨ | RT | CL | F. | 1 - | Na | 111 | e: |
|---|----|----|----|-----|----|-----|----|
| | | | | | | | |

The name of the Limited Liability Company is:

Top of the line Deaning Sewice LLC (Must contain the words "Limited Liability Company, "L.L.C," or "L.L.C," or "L.L.C,"

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

2247 Lloyd Lreck
Da Mynticolo Flor

2147 Nova Creck Rd Monticello Fla 32344

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:

Tenia Nunticy

2247 Woyd Creck Rd

Phorida street address (P.O. Box NOT acceptable)

Nontrollo Flor 32244

ty 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 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)

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| Titls: | Name and Address: | |
|---|---|-----------------------|
| "AMBR" = Authorized Member | | |
| "MGR" = Manager | lenin Huntley | 1 |
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| | Montrella Fla 2024 | 4 |
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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)