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

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2013 APR -4 AM 8: 16

# COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: B & M Flite Cleaning 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:
Bichy B Harris Jr. Name of Person
<del></del>
171 Daffodil Circle
Tallanassee FC 32305 City/State and Zip Code Code Code Code Code Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Pricing B. Harris at (850) 509-8905  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\text{S130.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status & Certif
Mailing Address Street Address

# Mailing Address

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

The name of the Limited Liability Company is:	

BEM Elite Cleaning Services, LLC
(Must contain the words "Limited Biability Company, "L.L.C." or "LLC.")

## ARTICLE II - Address:

ARTICLE 1 - Name:

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

Principal Office Address:

171 Daffod, 1 Circle

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:

Magredala Harris

171 Daffodil Circle
Florida street address (P.O. Box NOT acceptable)

Tallahassee FC 32305
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 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)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = ManagerAMB 2	Maguedala Harris 1719 Daffodi I Circle Tallahossee FC 32305
MCB	Bichy B. Harris Jr. 171 Doffodil Circle Jallanasce, FC 32305
(Use attachment if necessary)	
ffective date is listed, the date must be e of filing.)	date of filing:
If the date inserted in this block does n rument's effective date on the Departm	of meet the applicable statutory filing requirements, this date will not be lis ent of State's records.
LE VI: Other provisions, if any.	
The second procession is with	

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.

Diciny B. Harris Tr.

Typed or printed name of signee

# Filing Fees:

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

- \$ 30.00 Certified Copy (Optional)
- S 5.00 Certificate of Status (Optional)

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