⊙ 04/22/2019 11:44 AM 4/22/2019

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FL PATEL LAW PLLC Account Number : I20170000097 Phone : (727) 279-5037 Fax Number : (727)888-1294

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

Email Address: wilberder@gmail.com

FLORIDA LIMITED LIABILITY CO.

America's Finest Maintenance Company LLC

Certificate of Status	l
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Corporate Filing Menu

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COVER LETTER

April 18, 2019

To: New Filing Section
Division of Corporation

Subject: <u>America's Finest Maintenance Company LLC</u>
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:

Kalpesh J. Patel, Esq. FL Patel Law PLLC 360 Central Avenue 8th Floor St. Petersburg, Florida 33701 Fax: 727-888-1294

For further information concerning this matter, please call or e-mail:

Kalpesh Patel at 727-279-5037 or e-mail at contact@flpatellaw.com

Enclosed is our fax filing coversheet for \$130.00 for Filing Fee & Certificate of Status

FL Patel Law PLLC

For

America's Finest Maintenance Company LLC

A

Florida Limited Liability Company

ARTICLE I

Name

The name of the Limited Liability Company is: America's Finest Maintenance Company LLC (the Company).

ARTICLE II

Address

The mailing address and street address of the principal office of the Company is 4604 49th Street North Suite #1065, Saint Petersburg, Florida 33709.

ARTICLE III

Registered Agent, Registered office, & Registered Agent's Signature:

The name and the Florida Street Address of the Registered Agent are:

Derrick Wilberforce 4604 49th Street North Suite #1065 Saint Petersburg, Florida 33709

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 ull 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..

Dervick Wallerforce (sign)
(CONTINUED)

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2019 APR 22 AM 9: 25 SECRETARY OF STATE TALLAHASSEE, EL

ARTICLE IV:

The Name and Address of each person authorized to manage and control the Limited Liability Company:

Title AMBR = Authorized Member MGR = Manager	Name and Address
AMBR	Derrick Wilberforce 4604 49 th Street North Suite #1065 Saint Petersburg, Florida 33709

ARTICLE IV:

	The Effective date shall be the date	e of filing.
_	Derrick Wilberforce	(sign)
This documen	ture of a member or an authorized represent is executed in accordance with section 605, at any false information submitted in a docum	.0203 (1) (b), Florida Statutes.
	nstitutes a third-degree felony as provided for	
	Derrick Wilberforce	
	Authorized Representative/M	ember