## 19000114431

(Re	questor's Name)		
(Add	dress)	<del></del>	
(Add	dress)		
(Cit	y/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Name)		
(Do	cument Number)		
Certified Copies	_ Certificates of	Status	
Special Instructions to Filing Officer:			
W19.	40896	,	

Office Use Only



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## COVER LETTER

	New Filing Section Division of Corporations	
SUBJEC	R.R Hialeah Cleaning LLC	
		f Limited Liability Company
The enclo	osed Articles of Organization and fee(s	s) are submitted for filing.
Please re	turn all correspondence concerning this	s matter to the following:
	Rebeca Rodriguez	
		Name of Person
	R.R Hialeah Cleaning LLC	
		Firm/Company
	70 W 13 St Apt 2	
		Address
	Hinleah, Fl 33010	
	rerijo3123456@yahoo.com	City/State and Zip Code
		sed for future annual report notification)
For further	information concerning this matter, ple	ease call:
	Rebeca Rodriguez	786 400-4042 (
	Name of Person	Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:	
	Filing Fee S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee. Certified Copy (additional copy is enclosed)  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 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

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LORIDA DEPARTMENT OF ST Division of Corporations

July 1, 2019

REBECA RODRIGUEZ 70 W 13 ST #2 HIALEAH, FL 33010

SUBJECT: RR CLEANIING SERVICE LLC

Ref. Number: W19000060896

We have received your document for RR CLEANIING SERVICE LLC and your check(s) totaling \$130.00. 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 the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please list the complete principal office address.

Please return 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.

Neysa Culligan Regulatory Specialist II

Letter Number: 219A00013269

www.sunbiz.org

## 

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

Rebeca Rodriguez

(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:

	Name	
70 W 13 St Apt 2		
Florida street addre	ss (P.O. Box <u><b>NOT</b></u> ac	eceptable)
Hialeah	Fl	33010
City	State	Zip

Hialeah, Fl 33010

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> Pitle:</u>	Name and Address:	
'AMBR" = Authorized Member		
'MGR" = Manager		
MGR	Rebeca Rodriguez	
	70 W 13 St Apt 2	
	Hialeah, Fl 33010	
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Use attachment if necessary)		
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	of filing: <u>07/01/19</u> . (OPTIO) cific and cannot be more than five business days pri	

ARTICLE VI: Other provisions, if any,

REOUIRED 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.

Rebeca Rodriguez

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)
- \$ 5.00 Certificate of Status (Optional)

the document's effective date on the Department of State's records.