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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer:				

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COVERLETTER

TO:	New Filing Section Division of Corporations	
SUBJEC	ECT: Ali's Delightfol Painting and Cleaning	Contra
The enc	nclosed Articles of Organization and fee(s) are submitted for filing.	
Please re	return all correspondence concerning this matter to the following:	ب - عب
	Alison Ruth Aderhold	10 AUG 20 PH 4: 4%
		0 84 h
	9438 Wakulla Soring Rd.	की की
	Tallahassee Fl. 32305 delightful. Dainting. Contractors @gmodelightful. Dainting. Contractors @gmodelightful. Dainting. Contractors @gmodelightful.	ail.c
For furth	ther information concerning this matter, please call:	
	Name of Person Area Code Daytime Telephone Number	
/	osed is a check for the following amount: 5.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	
	Mailing Address New Filing Section Division of Corporations Street Address New Filing Section Division of Corporations	

Clifton Building

2661 Executive Center Circle

Tallahassee, Fl. 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

The name and the Florida street address of the registered agent are

Ali's Delightful Pa	ainting and Cleaning Contractors, LLC
XIC 140, 1.1. AMM CSS.	
The mailing address and street address of the principal office of the l Principal Office Address:	Mailing Address:
9438 Waknila Springle	9438 Wakslla Spring Pd Tall, Fl.32
ARTICLE III - Registered Agent. Registered Office, & Register	ed Agent's Signature:
The Limited Liability Company cannot serve as its own Registered another business entity with an active Florida registration.)	Agent. You must designate an individual or

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. Thereby 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..

State

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

ARTICLE IV- The name and address of each person authorize Title: "AMBR" = Authorized Member	d to manage and control the Limited Liab	ilitý Company:
Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	NOG 20 PH 4: 65
A the teden		
<u>Manger</u> ABBR <u>Manger</u>	Alma Tours 9438 Wakilla	hold SpringRe SpringRe
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the date of fill (If an effective date is listed, the date must be specific the date of filing.) Note: If the date inserted in this block does not meet the document's effective date on the Department of State ARTICLE VI: Other provisions, if any.	and cannot be more than five business due applicable statutory filing requirements	ays prior to or 90 days after
AKTICLE VI. Odici provisions, il dity.		
REQUIRED SIGNATURE:	en Adahole	<u>}</u>
This document is executed in I am aware that any false info constitutes a third degree felo	or an authorized representative of a maccordance with section 605.0203 (1) (b) remails on submitted in adocument to the Disprovided for in .817.155. F.S.	, Florida Statutes.

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)