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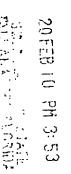
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## COVER LETTER

то:	Registration Section Division of Corporations
SUBJEC	RD DRAIN CLEANING LLC.,
SUBJEC	Name of Limited Liability Company
The enc	osed Articles of Organization and fee(s) are submitted for filing.
Please ro	eturn all correspondence concerning this matter to the following:
	WADDY DONASTORG
	Name of Person
	RD DRAIN CLEANING LLC.,
	Firm/Company
	2751 WOODRUFF DRIVE
	Address
	ORLANDO, FLORIDA 32837
	City/State and Zip Code WADDY403@GMAIL.COM
	E-mail address: (to be used for future annual report notification)
For further	er information concerning this matter, please call:
	WADDY DONASTORG 407 9707681
	Name of Person Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:
	S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status  Certificate of Status  S155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
,	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabi	lity Company is:			
RD DRAIN CL <u>ea</u>				
(Must en	d with the words "Limited	Liability Company, "L.!	L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street	address of the principal of	fice of the Limited Liab	oility Company is:	
<u>Princi</u>	Principal Office Address: 2751 WOODRUFF DRIVE		Mailing Address:	
275 EWOODRUFE			OODRUFF DRIVE	
	ORLANDO, FL 32837		ORLANDO, FL 32837	
another business entity with a	ny cannot serve as its own n active Florida registration	Registered Agent, You n.)	must designate an individual or	
The name and the Florida stree				
	WADDY DONASTO			
		Name		
	2751 WOODRUFF D	DRIVE		
	Florida street address	s (P.O. Box <u>NOT</u> accep	table)	
	ORLANDO	FLORIDA	32837	

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.

State

(CONTINUED)

Mille Mornostoy
Registered Agent's Signature (REQUIRED)

Zip

Page 1 of 2

	Title:	Name and Address:	
	"AMBR" = Authorized N "MGR" = Manager		
	MANAGER	WADDY DONASTORG	
		2751 WOODRUFF DRIVE	
		ORLANDO, FL 32837	
	VICE-PRESIDENT	ANA ROSA	
		2751 WOODRUFF DRIVE	
		ORLANDO, FL 32837	
	(Use attachment if neces		
		0.10010000	
ICL	EV: Effective date, if of	he date of filing: 01/30/2020	
	ective date is listed, the t of filing.)	t be specific and cannot be more than five business days prior to or 90	days ait
		s not meet the applicable statutory filing requirements, this date will not	be listed
ocu	ment's effective date on t	tment of State's records.	
	E VI: Other provisions, if		
		MERCIAL	
TCL	ING ALL PRIVATE AN		
TCL	ING ALL PRIVATE AN	_	

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.

WADDY DONASTORG

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)