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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	<u>.</u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 22, 2020

NESTOR DARIO GONZALEZ 1515 US 27 SOUTH LAKE PLACID, FL 33852

SUBJECT: ALL GREEN SERVICES LLC

Ref. Number: W20000063165

ALLABASSEE CARA

We have received your document for ALL GREEN SERVICES 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):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Owner is not a title.,

Please return the corrected original and one copy of 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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 420A00012302

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COVER LETTER

	ew Filing Sec vision of Cor					
/		EN SERVICES LLC				
SUBJECT	·	Name of	L.imi	ted Liabil	ity Company	
The enclose	ed Articles of	Organization and feets) are	submitted	for filing.	
Please retur	n all correspo	ndence concerning this	s mal	ter to the	following:	
	NESTOR D	ARIO GONZALEZ				
				Name of	Person	
	ALL GREE	N SERVICES LLC				
				Firm/Cc	mpany	
	ALL GREE	N SERVICES, MAIN	TEN	ANCE AN	ID REPAIRS	
				Addr	ess	
	1515 US 27	SOUTH				
Ę		D FL 33852	Cir	y/State or	d Zip Code	
_		-mail address; (to be (ised t	or future a	innual report notificat	ion)
For further in	iformation co	ncerning this matter, pl	easc	call:		
		ONZALEZ	86		4411100	
		e of Person				
Enclosed is	a check for the	se following amount:				
□\$125.00	Filing Fee	■\$130.00 Filing Fe Certificate of Status		Certifi	5,00 Filing Fee & ed Copy al copy is enclosed)	□\$160,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailin	g Address			Street Address	

New Filing Section Division

2415 N. Monroe Street, Suite 810

The Centre of Tallahassee

Tallahassee, Fl. 32303

New Filing Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ALL GREEN SERV		11.1.1.1.1.7.	white a second teachers	
(Must	contain the words "Limited	гыа р ину Company.	Table of Table	
ARTICLE II - Address:				
The mailing address and str	eet address of the principal	office of the Limited	Liability Company is:	
Principal Office Address:			Mailing Address:	
1515 US 27 SOUT	н			
				
LAKE PŁACID FL	33852			
		& Registered Ages	nt's Signature:	
ARTICLE III - Registeree	Agent, Registered Office		nt's Signature: You must designate an individual or	
ARTICLE III - Registered	Agent, Registered Office pany cannot serve as its ow	n Registered Agent. `		
ARTICLE III - Registered (The Limited Liability Com another business entity with	l Agent, Registered Office pany cannot serve as its ow ran active Florida registrati	n Registered Agent. \ on.)		
ARTICLE III - Registeres	Agent, Registered Office pany cannot serve as its ow ran active Florida registrative taddress of the registere	n Registered Agent. \ on.)		
ARTICLE III - Registered The Limited Liability Com another business entity with	l Agent, Registered Office pany cannot serve as its ow ran active Florida registrati	n Registered Agent. \ on.) ad agent are:		
ARTICLE III - Registered (The Limited Liability Com another business entity with	Agent, Registered Office pany cannot serve as its ow ran active Florida registrative taddress of the registere	n Registered Agent. \ on.)		
ARTICLE III - Registered The Limited Liability Com another business entity with	Agent, Registered Office pany cannot serve as its ow ran active Florida registrative taddress of the registere	n Registered Agent. \ on.) ad agent are:		
ARTICLE III - Registered (The Limited Liability Com another business entity with	I Agent. Registered Office pany cannot serve as its ow ran active Florida registrati rect address of the registere NESTOR GONZALEZ	n Registered Agent. \ on.) ad agent are:	You must designate an individual or	
ARTICLE III - Registered (The Limited Liability Com another business entity with	I Agent. Registered Office pany cannot serve as its ow ran active Florida registrati rect address of the registere NESTOR GONZALEZ	n Registered Agent. Von.) ed agent are: Name	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. 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 familian 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)

20 JUL 21 FH 5: 07

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title;</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
MGR	NESTOR GONZALEZ	
	754 PLACID LAKES BLVD LAKE PLACID FL 33852	
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(If an effective date is listed, the date must be s the date of filing.) Note: If the date inserted in this block does not the document's effective date on the Department.	meet the applicable statutory filing requirer	
ARTICLE VI: Other provisions, if any.		
REOUIRED SIGNATURE:		 .
This document is exec I am aware that any fal	nember or an authorized representative of uted in accordance with section 605.0203 (1 se information submitted in a document to the ce felony as provided for in s.817.155, F.S.) (b), Florida Statutes.
Nesta	Dai?o 6002010 Typed or printed name of signee	2 . Z

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)