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(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL.
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

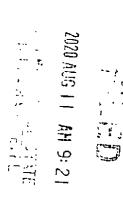
J. FASON 403 . 1 2020

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COVER LETTER

TO:	New Filing Sec Division of Cor				
SUBJE		uperior Cleaning Serv	rices, LLC		
20 Day	cı	Name o	f Limited Liab	oility Company	
The enc	losed Articles of	Organization and fee(s) are submitt	ed for filing.	
Please r	eturn all correspo	ondence concerning th	is matter to th	e following:	
	Tony Simme	ons			
			Name	of Person	
	Simmons Su	perior Cleaning Servi	ces, LLC		
		-	Firm/6	Company	
	2901 N Tarr	agona St			
		•	Ad	dress	
	Pensacola, F	L 32503			
	· · · · · · · · · · · · · · · · · · ·	1979@ushoo.com	City/State	and Zip Code	
		11979@yahoo.com E-mail address: (to be	used for futur	e annual report notificat	ion)
For furth		ncerning this matter. p			
	Tony Simmo		850 t (503-2291	
	Nam	e of Person	Area Code	Daytime Telephor	ne Number
Enclose	d is a check for t	he following amount:			
	.00 Filing Fee	□\$130.00 Filing For Certificate of Statu	s Cert	155.00 Filing Fee & ified Copy onal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	ig Address illing Section on of Corporations tox 6327 assee, FL 32314		Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3236	assee eet, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Simmons Superior Cleaning Services, LLC	
(Must conatin the words "Limited Liabil	ty Company, "L.L.C.," or "LLC.")
TCLE II - Address:	and a Committee Committee of
TCLE II - Address: mailing address and street address of the principal office of the principal of	of the Emitted Liability Company is: <u>Mailing Address</u>
mailing address and street address of the principal office of	

(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

ARTICLE I - Name:

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)

ARTICLE IV-

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

E V: Effective date, if other than the date of filing: ective date is listed, the date must be specific and cannot be more than five business defiling.) The date inserted in this block does not meet the applicable statutory filing requirements ment's effective date on the Department of State's records. E VI: Other provisions, if any.	entative of a member. 05.0203 (1) (b), Florida Statutes. ument to the Department of State 155, F.S.	
(Use attachment if necessary) E. V: Effective date, if other than the date of filing:	entative of a member. 05.0203 (1) (b), Florida Statutes. uncent to the Department of State	_ س_
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