## L20000278558

(Re	questor's Name)	
(Ad	dress)	
hA)	dress)	
(1.6	4.000/	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(00	cument Number)	
(50	outhern Humbery	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Decick Thompson

## **COVER LETTER**

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	lew Filing Sec Division of Cor					
CHR IFC	Bryant's Pr	estige Cleaning & Fl	oor Car	e, LLC		
SUBSEC	·	Name	of Limit	ed Liabili	ty Company	
The enclo	sed Articles of	Organization and fee	(s) are :	submitted	for filing.	
Please ret	urn all correspo	ondence concerning th	nis matt	er to the f	ollowing:	
	Daniel Bryan	nt Jr.				
				Name of	Person	
	Bryant's Pres	stige Cleaning & Floo	or Care	LLC		
				Firm/Co	трапу	
	3501 Blair S	tone Road, Apt 1328				
		<del>.</del> .		Addr	ess	
	Tallahassee,	FL 32301				
	danbryant759	@gmail.com	Cit	y/State an	d Zip Code	
			used fo	or future a	nnual report notificati	on)
For further	information co	ncerning this matter,	please (	eall:		
	Daniel Bryan	nt Jr.	850 at (		728-8480	
	Nam	e of Person			Daytime Telephon	e Number
Enclosed	is a check for t	he following amount:				
□\$125.0	0 Filing Fee	□\$130.00 Filing F Certificate of State		Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	■\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		ig Address			Street Address	
		iling Section		New Filing Section Division The Centre of Tallahassee		
	Division of Corporations P.O. Box 6327			2415 N. Monroe Street, Suite 810		
	Tallah	assee, FL 32314			Tallahassee, FL 3230	3

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

(CONTINUED)

Repretered Agent's Signature (REQUIRED)

## ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Mer "MGR" = Manager	трег
	David Deput I-
AMBR	Daniel Bryant Jr. 3501 Blair Stone Road, Apt 1328
	Tallahassee, FL 32301
	<del></del>
an effective date is listed, the date date of filing.)	•
TICLE VI. Outer provisions, if an	у-
REOUIRED SIGNATURE	
4	La.
This docum I am aware t	ature of member or an authorized representative of a member.  ment is executed in accordance with section 605.0203 (1) (b). Florida Statutes, that any false information submitted in a document to the Department of State a third degree felony as provided for in s.817.155, F.S.
This docum I am aware t constitutes a	nent is executed in accordance with section 605.0203 (1) (b). Florida Statutes, that any false information submitted in a document to the Department of State a third degree felony as provided for in s.817.155, F.S.
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This docum I am aware t constitutes a	nture of a member or an authorized representative of a member.  nent is executed in accordance with section 605.0203 (1) (b), Florida Statutes, that any false information submitted in a document to the Department of State a third degree felony as provided for in s.817.155, F.S.

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)