L20000303147

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

Office Use Only



400351877034

09/15/20--01010--020 **125.00

RFC-IVED SEP 1 4 2020

2020 SEP 15 PH 3: 20

COVER LETTER

	ew Filing Section ivision of Corporations		•		
SUBJECT	: Holmes C Name of Lim	Leaning Serv ited Liability Edunpany	ice		
The enclos	ed Articles of Organization and fee(s) are	submitted for filing.			
Please retu	rn all correspondence concerning this ma	Name of Person			-
		Firm/Company			-
	2529 Colson	N AVE			_
	Sarasota F	Ta. 34234 ty/State and Zip Code			_
-	E-mail address: (to be used	ty/State and Zip Code n es 4 G G m ci for future annual report notification	1.com	-	_
for further in	nformation concerning this matter, please	call:			
	Quana Molas at 1 Ar	86) 612-55 ea Code Daytime Telephone	85 Number		
Epclosed is	a check for the following amount:				
2\$125.00	Filing Fee	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 F Certificate of Certified Co (additional cop	of Status & py	& osed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Div The Centre of Tallahas 2415 N. Monroe Street Tallahassee, FL 32303	see ., Suite 810		2020 Scir 15 PH

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Holmes Cleaning Se	rice LLC
(Must contain the words "Limited Liabyhity Compar	y, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limit	ed Liability Company is:
Principal Office Address:	Mailing Address:
2529 Colson Ave	-
Sara-Sota / FL 34234	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent (The Limited Liability Company cannot serve as its own Registered Agent another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	
Jawana Hulm	<u>&</u>
O C O O O Name	·
25 d9 6150n) HVE
Florida street address (P.O. Box NO)	
	7

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.

Owore, W. Holmes

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2020 SEI 15 PH 3: 20

"MGR" = Manager	
AMBR	Tawana Holmes
(Use attachment if necessary)	
	specific and cannot be more than five business days prior to or 90 c
of filing.)	t meet the applicable statutory filing requirements, this date will not be
of filing.) The date inserted in this block does no	t meet the applicable statutory filing requirements, this date will not be
of filing.) The date inserted in this block does no ment's effective date on the Department EVI: Other provisions, if any.	t meet the applicable statutory filing requirements, this date will not be
of filing.) The date inserted in this block does no ment's effective date on the Department E VI: Other provisions, if any. REOUIRED SIGNATURE:	t meet the applicable statutory filing requirements, this date will not int of State's records.
of filing.) The date inserted in this block does no ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a telephone in the block does no ment's effective date on the Department in the block does no ment's effective date on the Department in the block does no ment's effective date on the Department in the block does no ment's effective date on the Department in the block does no ment's effective date on the Department in the Book does no ment's effective date on the Department in the Departmen	t meet the applicable statutory filing requirements, this date will not int of State's records. Me William William State of a member.
of filing.) The date inserted in this block does no ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a to This document is executed any factorized and aware that any factorized are selected as the content of the conten	t meet the applicable statutory filing requirements, this date will not int of State's records.
of filing.) The date inserted in this block does no ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a range of a management is exected a management of a range of of a ra	t meet the applicable statutory filing requirements, this date will not int of State's records. Meet W. J.
of filing.) The date inserted in this block does no ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a range of a management is exected a management of a range of of a ra	t meet the applicable statutory filing requirements, this date will not int of State's records. Meet W. J.
of filing.) The date inserted in this block does no ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a range of a man aware that any factoristitutes a third degree of a range of a rang	t meet the applicable statutory filing requirements, this date will not int of State's records. Member or an authorized representative of a member, cuted in accordance with section 605.0203 (1) (b), Florida Statutes, like information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S. Dana D. Molmes Typed or printed name of signee
of filing.) The date inserted in this block does no ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a range of a man aware that any factoristitutes a third degree of a range of a rang	t meet the applicable statutory filing requirements, this date will not int of State's records. Member or an authorized representative of a member, cuted in accordance with section 605.0203 (1) (b), Florida Statutes, lise information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S. Dana D. Holmes Typed or printed name of signee Filing Fees: Drganization and Designation of Registered Agent

as

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

ARTICLE IV-