2/5/2021

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FLORIDA LIMITED LIABILITY CO. CARMELA CLEANING BEST, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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Electronic Filing Menu

Corporate Filing Menu

Help

From: Yanet Avila

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

CARMELA CLEANING BEST, LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE H - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 1100 NE 191 ST STE: E-24 NORTH MIAMI BEACH, FL 33179 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are

another business entity with an active Florida registration.)

CARMELA G. RUB	ALCABA		
	Name		
1100 NE 191 ST ST	5: E-24		
Florida street addres	s (P.O. Box <u>NOT</u> a	oceptable)	
NORTH MIAMI BE	ACH FL	33179	
City	State	Zip	

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 cartificate. Thereby 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.

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

/a/ Carmala G. Rubalcaba
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page: 4 of 4

effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 ate of filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not ocument's effective date on the Department of State's records.	Title:	Name and Address:
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REQUIRED SIGNATURE: /af Carmela G. Rubalcaba 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 5.817.155. F.S.	ICLE V: Effective date, it other than the confective date is listed, the date must be late of filing.) E: If the date inserted in this block does not be decument's effective date on the Department of the Depar	continues the applicable statutory filing requirements, this date will not ent of State's records. Carmela G. Rubalcaba member or an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State
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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)