

L21000 199846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

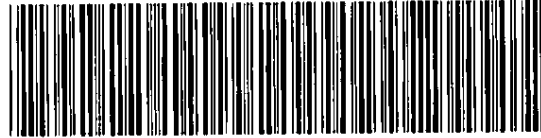
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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RECEIVED  
2021 MAY -7 PM 3:18  
SECRETARY OF STATE  
FALL AHAASSEE, OKLAHOMA

RECEIVED  
2021 MAY -7 PM 3:36  
SECRETARY OF STATE  
FALL AHAASSEE, OKLAHOMA

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Under Dog Cleaning Service  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jamil Purcell  
Name of Person

Firm/Company

720 West Dunn ST.  
Address

Tall, FL, 32304  
City/State and Zip Code

Jamil Purcell 284 @ gmail . com  
E-mail address: (to be used for future annual report notification)

2021 MAY -7 PM 3:30

For further information concerning this matter, please call:

Jamil Purcell at ( 850 ) 901-3423  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

Mailing Address  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address  
New Filing Section Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Purcell Cleaning Service LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

720 West Dunn ST.  
Tall, FL 32304

Mailing Address:

720 West Dunn ST  
Tall, FL 32304

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

Ethel Stevens  
Name

720 West Dunn ST.  
Florida street address (P.O. Box NOT acceptable)

Tall FL 32304  
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 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.*

Ethel Stevens  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2021 MAY -7 PM 3:36

ARTICLE IV-

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

Title:

"AMHR" = Authorized Member:

"MGR" = Manager

Jamil Purcell

Jai'mya Purcell

Name and Address:

Jamil Purcell  
Tall, FL 32304 720 West Dunn ST.

Jai'mya Purcell  
Tall FL 32304 720 West Dunn ST.

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Jamil Purcell

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 s.817.155, F.S.

Typed or printed name of signee

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)