L21000201059

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	cument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	

Office Use Only



200361778872

04/01/21--01018--021 **125.00



COVER LETTER

TO:	Registration Section Division of Corporations			37.21
SUBJE	NANCY ESPINAL CLEANIN	NG, LLC	· :	7 ; , 1
SUBJE		of Limited Liab	ility Company	<u> </u>
The enc	losed Articles of Organization and fe	ee(s) are submitte	d for filing.	7771 NP2 -1 PH 1:16
Please re	eturn all correspondence concerning	this matter to the	following:	5
	NANCY ESPINAL			
		Name o	of Person	-
	NANCY ESPINAL CLEANING	G. LLC .,		
		Firm/C	Company	-
	3800 DOUBLE EAGLE DRIVI	E APT 3324		
		Ado	dress	-
	ORLANDO, FLORIDA 32839			
	NANCYESPINAL956@GMAIL		and Zip Code	_
	E-mail address: (to b	oe used for future	annual report notification)	_
For furthe	er information concerning this matter	, please call:		
	NANCY ESPINAL	407 at (255-0585)	
	Name of Person	Area Code	Daytime Telephone Number	
Enclose	d is a check for the following amoun	1 :		
	Filing Fee \$130.00 Filing Fo	ee & \$155 certi	.00 Filing Fee & \$160.00 Filing Fee. fied Copy mal copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ā	R	TI	C	LE.	۱.	Na	mе	:
---	---	----	---	-----	----	----	----	---

The name of the Limited Liability Company is:

NANCY ESPINAL CLEANING, LLC ...

(Must end with 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:

Mailing Address:

3800 DOUBLE EAGLE DRIVE APT 3324 ORLANDO, FLORIDA 32839

3800 DOUBLE EAGLE DRIVE APT 3324 ORLANDO, FLORIDA 32839

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:

NANCY ESPINAL

Name

3800 DOUBLE EAGLE DRIVE APT 3324

Florida street address (P.O. Box NOT acceptable)

ORLANDO State

City

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.,

Many Of .

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	NANCY ESPINAL
WOK	3800 DOUBLE EAGLE DRIVE APT 3324
	ORLANDO, FLORIDA 32839
	
	
(Use attachment if necessary) CLE V: Effective date, if other than the defective date is listed, the date must be	date of filing: 03/29/2021
CLE V: Effective date, if other than the deffective date is listed, the date must be determined in this block does not ment's effective date on the Departm CLE VI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 90 days af ot meet the applicable statutory filing requirements, this date will not be liste ent of State's records.
CLE V: Effective date, if other than the deffective date is listed, the date must be defiling.) If the date inserted in this block does not be defined at the defective date on the Department's effective date on the Department.	e specific and cannot be more than five business days prior to or 90 days after ot meet the applicable statutory filing requirements, this date will not be listed ent of State's records.
CLE V: Effective date, if other than the deffective date is listed, the date must be te of filing.) If the date inserted in this block does not cument's effective date on the Departm CLE VI: Other provisions, if any. NING FOR RESIDENTIAL AND COMMENTAL AND COMMENT SIGNATURE: Signature of a This document is explain aware that any	e specific and cannot be more than five business days prior to or 90 days af ot meet the applicable statutory filing requirements, this date will not be liste ent of State's records. MMERCIAL anember 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
CLE V: Effective date, if other than the deffective date is listed, the date must be te of filing.) If the date inserted in this block does not cument's effective date on the Departm CLE VI: Other provisions, if any. NING FOR RESIDENTIAL AND COMMENTAL AND COMMENT SIGNATURE: Signature of a This document is explain aware that any	e specific and cannot be more than five business days prior to or 90 days af ot meet the applicable statutory filing requirements, this date will not be liste ent of State's records. MMERCIAL The member of an authorized representative of a member, ecuted in accordance with section 605.0203 (1) (b). Florida Statutes.
CLE V: Effective date, if other than the deffective date is listed, the date must be te of filing.) If the date inserted in this block does not cument's effective date on the Departm CLE VI: Other provisions, if any. NING FOR RESIDENTIAL AND COMMENTAL AND COMMENT SIGNATURE: Signature of a This document is explain aware that any	e specific and cannot be more than five business days prior to or 90 days af ot meet the applicable statutory filing requirements, this date will not be liste ent of State's records. MMERCIAL 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 gree felony as provided for in s.817.155, F.S.

ARTICLE IV-

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)