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TALLAMASSES FLORIDA

## COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJECT: Tight Maze Cleaning Name of Limited Liability	Company LLC y Company			
The enclosed Articles of Organization and fee(s) are submitted to	or filing.			
Please return all correspondence concerning this matter to the following:				
Hanoi Gonzale Name of l	?erson			
Tight Maze Cleaning Con	· · /			
1538 Rankin Aue				
19/19hosse F/2, 32310				
Tallahossee Fla. 32310 City/State and Melinda berry mombab 791 E-mail address: (to be used for future as	I Zip Code  Lama, L. Com  notification)			
For further information concerning this matter, please call:				
Hanoi Genzale 2 at ( 186) Name of Person Area Code	Daytime Telephone Number			
Enclosed is a check for the following amount:				
Certificate of Status Certific	5.00 Filing Fee & St60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Address	Street Address			
New Filing Section Division of Corporations	New Filing Section Division The Centre of Tallahassee			
Division of Corporations				

P.O. Box 6327

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

ARTICLE II - Address: The mailing address and street address of the principal office of	the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1538 Rankin Ave Tallallahasse Fla. 32310	<u>Sqme</u>
ARTICLE III - Registered Agent, Registered Office, & Registered Company cannot serve as its own Register another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent a Hanoi Gonzal Name	red Agent. You must designate an individual or

(CONTINUED)

Meluda Bena Registered Agent's Signature (REQUIRED) 1

## ARTICLE IV-

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

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager  Manager	Hanoi, Gonzalez	
	Tallamassee Fla 32310	
Manger	Melivida Berry 1530 Kankin Ave Tallahassec Fla. 32310	
<del></del>		
(Use attachment if necessary)		
If an effective date is listed, the date must be the date of filing.)	ate of filing:	rior to or 90 days after
Note: If the date inserted in this block does not the document's effective date on the Department.	of meet the applicable statutory filing requirements, this ent of State's records.	Ä
ARTICLE VI: Other provisions, if any.		27
		-
		<del></del>
REQUIRED SIGNATURE:		<del></del>
Melind.	here here an authorized representative of a member	<del></del>
This document is ex I am aware that any i	member of an authorized representative of a membe ecuted in accordance with section 605.0203 (1) (b), Flori false information submitted in a document to the Departmere felony as provided for in s.817.155, F.S.	da Statutes.
Melin	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)