## L22000214121

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>=</del> #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## **COVER LETTER**

TO:	New Filing Sect Division of Cor				
		ITRAL FLORIDA PRESS	URE WASE	IING, LLC	
Name of Limited Liability Company					
The en	closed Articles of	Organization and fee(s) are	submitted f	or filing.	
Please	return all correspo	ndence concerning this ma	tter to the fo	llowing:	
	HECTOR D.	JIMENEZ JR			
			Name of I	Person	
	D & N CEN	TRAL FLORIDA PRESSU	JRE WASH	ING, LLC	
		<del></del>	Firm/Con	ірапу	<u> </u>
	2932 JERSE	Y RD			
	<del> </del>		Addre	SS	
	WINTER HA	AVEN, FL 33881			
			ity/State and	Zip Code	
		303@HOTMAIL.COM  E-mail address: (to be used	for future as		on)
For furt		ncerning this matter, please			,
	HECTOR D.	JIMENEZ JR 78	37	356-0470	
	Nam			Daytime Telephon	e Number
Enclos	sed is a check for the	ne following amount:			
<b>□\$</b> 12	5.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certific	.00 Filing Fee & d Copy I 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:	
D & N CENTRAL FLORIDA PRESSURE WASHIN (Must contain the words "Limited Liability C	
ARTICLE II - Address: The mailing address and street address of the principal office of the	e Limited Liability Company is:
Principal Office Address:	Mailing Address:
2932 JERSEY RD	2932 JERSEY RD
WINTER HAVEN, FL 33881	WINTER HAVEN, FL 33881
	<u> </u>
ARTICLE III - Registered Agent, Registered Office, & Register (The Limited Liability Company cannot serve as its own Registere another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are	d Agent. You must designate an individual or
HECTOR DAVID JIMENEZ.	<u></u>
Name	
2932 JERSEY RD	
Florida street address (P.O. B)	NOT acceptable)

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..

State

WINTER HAVEN City

(CONTINUED)

That . Turns
Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

"AMBR" = Authorized Member	
93.7CD# = 3.4	
"MGR" = Manager	HECTOR DANIED INCENIES ID
MGR	HECTOR DAVID JIMENEZ JR 2932 JERSEY RD. WINTER HAVEN FL 33881
AMBR	NIDIA MOYA
	2932 JERSEY RD, WINTER HAVEN FL. 33881
AMBR	LIZBETH VEGA
74.1.O.C	2932 JERSEY RD. WINTER HAVEN, FL 33881
	•
(Use attachment if necessary)	
	date of filing:(OPTIONAL)
CLE V: Effective date, if other than the	date of filing: (OPTIONAL)  ne specific and cannot be more than five business days prior to or 90 days after
CLE V: Effective date, if other than the effective date is listed, the date must bute of filing.)	ne specific and cannot be more than five business days prior to or 90 days after
CLE V: Effective date, if other than the effective date is listed, the date must hate of filing.)  If the date inserted in this block does	ne specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed
ICLE V: Effective date, if other than the effective date is listed, the date must hate of filing.)  If the date inserted in this block does ocument's effective date on the Department.	ne specific and cannot be more than five business days prior to or 90 days after not meet the applicable statutory filing requirements, this date will not be listed
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Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

/S/ HECTOR DAVID JIMENEZ JR

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

22 APR 19 AH 3: 50

## COVER LETTER

то:	New Filing Section Division of Corporations
SUBJE	D & N CENTRAL FLORIDA PRESSURE WASHING, LLC
3000	Name of Limited Liability Company
The enc	losed Articles of Organization and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
	HECTOR D. JIMENEZ JR
	Name of Person
	D & N CENTRAL FLORIDA PRESSURE WASHING, LLC
	Firm/Company
	2932 JERSEY RD
	Address
	WINTER HAVEN, FL 33881
	City/State and Zip Code  IJIMENEZ0303@HOTMAIL.COM
	E-mail address: (to be used for future annual report notification)
For furthe	er information concerning this matter, please call:
	HECTOR D. JIMENEZ JR 787 356-0470
	Name of Person Area Code Daytime Telephone Number
Enclose	d is a check for the following amount:
□\$125.	.00 Filing Fee
	Mailing AddressStreet AddressNew Filing SectionNew Filing Section DivisionDivision of CorporationsThe Centre of TallahasseeP.O. Box 63272415 N. Monroe Street, Suite 810Tallahassee, FL 32314Tallahassee, FL 32303