Division of Corporations **Electronic Filing Cover Sheet**

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mail	Addrage			

FLORIDA LIMITED LIABILITY CO. GARDI SERVICES & CLEANING LLC

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability	Company is:			
GARDI SERVICES &	: CLEANING LLC			
(Must contain	n the words "Limit	ed Liability Compa	ny, "L.L.C.," or "LLC.")	_
ARTICLE II - Address: The mailing address and street add	dress of the principa	al office of the Lim	ited Liability Company is:	
Principa	Office Address:		Mailing Address:	
1500 NE MIAMI PL A MIAMI, FL 33132	APT: 2708	<u> </u>	SAME	
ARTICLE III - Registered Ager (The Limited Liability Company of another business entity with an ac	annot serve as its o	wn Registered Age	kgent's Signature: nt. You must designate an individual or	
The name and the Florida street a	ddress of the registe	red agent are:		
	NELSON M. DIA	Z GOMEZ		
		Name	·-··-	
	1500 NE MIAMI	PL APT: 2708		
	Florida street add	ress (P.O. Box NO	T acceptable)	
	МІАМІ	FL	33132	
	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..

/s/ Nelson M. Diaz Gomez
Registered Agent's Educature (REQUIRED)

(CONTINUED)

SECRETARY OF STATE

From: Yanet Avila

Title: "AMBR" = Authorized Membe	Name and Address:
"MGR" = Manager	
AMBR	SANTIAGO VILLA GARCIA 1500 NE MIAMI PL APT 2708 MIAMI, FL 33132
AMBR	NELSON M DIAZ GOMEZ 1500 NE MIAMI PL APT 2708 MIAMI, FL 33132
(Use attachment if necessary)	
effective date is listed, the date mate of filing.) If the date inserted in this block of	loes not meet the applicable statutory filing requirements, this date will not be listed
ICLE V: Effective date, if other that effective date is listed, the date mate of filing.) If the date inserted in this block cocument's effective date on the De	ust be specific and cannot be more than five business days prior to or 90 days after loss not meet the applicable statutory filing requirements, this date will not be listed
ICLE V: Effective date, if other that affective date is listed, the date in ale of filling.) If the date inserted in this block cocument's effective date on the De	ust be specific and cannot be more than five business days prior to or 90 days after floes not meet the applicable statutory filing requirements, this date will not be listed
ICLE V: Effective date, if other than effective date is listed, the date mate of filing.) If the date inserted in this block occument's effective date on the Delicle VI: Other provisions, if any. REQUIRED SIGNATURE:	ust be specific and cannot be more than five business days prior to or 90 days after toos not meet the applicable statutory filing requirements, this date will not be listed partment of State's records.
ICLE V: Effective date, if other that is effective date is listed, the date mate of filing.) If the date inserted in this block occument's effective date on the Desical ICLE VI: Other provisions, if any. REOURED SIGNATURE: Signature This document I am aware tha	ust be specific and cannot be more than five business days prior to or 90 days after floes not meet the applicable statutory filing requirements, this date will not be listed

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)