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(Requestor's Name)	
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PICK-UP WAIT MAIL	
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COVER LETTER

TO:	New Filing Secti Division of Corp						
SUBJEC		CARIBBEAN CLEANI	NG LLC				
Name of Limited Liability Company							
The enc	losed Articles of O	rganization and fee(s) a	re submitted	for filing.			
Please re	eturn all correspon	dence concerning this m	atter to the f	following:			
	Zuraima Torre	s					
			Name of	Person			
	ZURAIMA C	ARIBBEAN CLEANIN	G LLC				
	Firm/Company						
	102 E. NEW I	IAVEN AVE Pmb 106,					
			Addr	ess			
	Melbouirne, F	L 32901					
	zuraima 1214@		City/State an	d Zip Code			
	E-1	nail address: (to be used	for future a	nnual report notificati	on)		
or furthe	r information conc	erning this matter, pleas	e call:				
	Zuraima Torres		21	298-1826			
	Name			Daytime Telephon	e Number		
Enclosed	is a check for the	following amount:					
		□\$130.00 Filing Fee & Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Division P.O. Box	ng Section of Corporations : 6327		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Street	issee et, Suite 810		
	l allahas:	see, FL 32314		Tallahassee, FL 3230.	ز		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ZURAIMA CA	ARIBBEAN CLEANING LLC	
(Mus	st conatin the words "Limited Liabi	lity Company, "L.L.C" or "LLC.")
RTICLE II - Address:		0.1 0.1 5 2.1 1.1 10 20 7
ne mailing address and st	treet address of the principal office rincipal Office Address:	of the Limited Liability Company is: Mailing Address:
e mailing address and st		

The name and the Florida street address of the registered agent are:

.

Zuraima Torres			R2 -
	Name		
102 E. NEW HAVE	22		
Florida street addres	一点。		
Melbouirne	FL.	32901	
City	State	Zip	DRID DRID DRID DRID DRID DRID DRID DRID

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)