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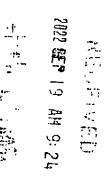
(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer;					
2022 SEP 19 AM 9: 53 SECTION 11 STATE ALL ATTASSEE, FLORING Office One Only					
Office Use Only					



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D. O'KEEFE SEP 19 2022

## **COVER LETTER**

Division of Corporations
SUBJECT: DALY WINDOW CLEANING Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Cameron Chase Daly
Name of Person
Day Window Cleaning Firm/Company
Firm/Company
7436 Bookout Cove
Address
Talphassee FL 32310
Chasedaly 70 Egnail. Com
E-mail address: (to be used for futdre annual report notification)
For further information concerning this matter, please call:
Chase Daly at (850) 841-0627  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee U\$130.00 Filing Fee & □\$155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy

# **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

(additional copy is enclosed)

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A DOCTOR	~1	**			
ART	ЮL	Æ.	-	Na	me:

The name of the Limited Liability Company is:

DALY WINDOW CLEANING LLC

(Must contain 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:
7436 Bookout Cove	7436 Bookut Cove
Tallahassee FL 32310	Tallabasse & Fl 32310

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:

Cameon Chase Daly

Name

7436 Bookout Cove

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

Tallahassee FL 32310

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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. . . . .

## ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager A M 3	Cameron C 7436 Bookou F1 32310	hase Daly + Cave To	/ allahass
(Use attachment if necessary)		2022 SEP 19 AM 9: 53 SECRETARY OF STATE TALLAMASSEE FLORINA	
ARTICLE V: Effective date, if other than the da (If an effective date is listed, the date must be sthe date of filing.)  Note: If the date inserted in this block does not the document's effective date on the Department ARTICLE VI: Other provisions, if any.	specific and cannot be more than five busi t meet the applicable statutory filing require	iness days prior to or 90 d	•
This document is exec 1 am aware that any fa	member or an authorized representative cuted in accordance with section 605.0203 (lse information submitted in a document to rec felony as provided for in s.817.155, F.S.	(1) (b), Florida Statutes. the Department of State	

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)