## L23000007580

(Re	equestor's Name)		
(Ad	idress)		
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(Cit	ty/State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
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Office Use Only



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N. C. Harris 11 4.

2023 JAH-3 AM H: 40

;

To: Florida Department of State

**New Filing Section - Division of Corporations** 

My name is Cizenando Edward do Nascimento, my residential address is 9992 Tawny Meadow Aly, Winter Garden Zip Code 34787, my contact phone is 689 241 9273, I am with the purpose of undertaking with the company, starting in my home and the measure of growth transfer the office to Miami Dade.

I am in the USA about 1 year, in Brazil I am a retired engineer, with more than 35 years of experience in the field.

My intention is register Edward Service Environment LLC that will provide end-to-end environmental consultant services including Air Quality Services; Emissions Banking/Credits; Hazardous Materials Handling and Hazardous Waste Generator Requirements; and Environmental Audits, Compliance, Due Diligence, and Expert Witness.

Cizenando Edward do Nascimento

SSN 770-55-2420

EA MSC2290584145

Driver License D525-105-62-256-0;

## COVER LETTER

то:	New Filing Section Division of Corporations				
SUBJE	Edward Service Environment LLC				
2,7,12,11,	Name of Limited Liability Company				
The enc	losed Articles of Organization and fee(s) are submitted for tiling.				
Please r	eturn all correspondence concerning this matter to the following:				
	Cizenando Edward do Nascimento				
	Name of Person	<del></del>			
	Edward Service Environment LLC				
	Firm/Company				
	9992 Tawny Meadow Aly				
	Address				
	Winter Garden/FL /34787				
	City/State and Zip Code				
	cize_cdward@hotmail.com				
	E-mail address: (to be used for future annual report notification)				
For furthe	er information concerning this matter, please call;				
	Cizenando Edward do Nascimento 407 689 241 9273				
	Name of Person Area Code Daytime Telephone Number				
Enclose	d is a check for the following amount:				
<b>□\$</b> 125	.00 Filing Fee \$\Bigsquare \Bigsquare \Bigsq	of Status &			

**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

<u>I</u>	Edward Service Environment LLC		
	(Must contain the words "Limited Liability	y Company, "L.L.C.," or "L.L.C.")	
	II - Address: address and street address of the principal office of	the Limited Liability Company is:	
	Principal Office Address:	Mailing Address:	
3	992 Tawny Meadow Aly -W. Garden Fl. 34787	9992 Tawny Meadow Aly -W. Garden Fl. 34 H	
	III - Registered Agent, Registered Office, & Reg d Liability Company cannot serve as its own Regist		
	iness entity with an active Florida registration.)	ered Agent. 10th must designate an individual to	
anomer ous			
	nd the Florida street address of the registered agent	are:	
	nd the Florida street address of the registered agent: <u>Cizenando Edward do Nase</u>		
		imento	
	Cizenando Edward do Nasc	imento	
	<u>Cizenando Edward do Nasc</u> Name	imento	
	Cizenando Edward do Nase Name 9992 Tawny Meadow Aly Florida street address (P.O.	imento	

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)

BJAK-3 AMH:

M

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

Title:	Name and Address;
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Cizenando Edward do Nascimento 9992 Tawny Meadow Aly -Winter Garden, FL 34787
(Use attachment if necessary)	
f an effective date is listed, the date mu te date of filing.) <u>lote:</u> If the date inserted in this block d	the date of filing: 01-01-2023 (OPTIONAL) ist be specific and cannot be more than five business days prior to or 90 days after one not meet the applicable statutory filing requirements, this date will not be listed as
ne document's effective date on the Dep RTICLE VI: Other provisions, if any,	eartment of State's records.
REQUIRED SIGNATURE:	rando Idyjard del Variner t
Fignature This document I am aware that	e of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b). Florida Statutes, any false information submitted in a document to the Department of State rd degree felony as provided for in s.817.155. F.S.
Cizen	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)

023 JAN -3 AM II: 4

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