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COVER LETTER

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Division o	g Section of Corporations			
CUDIECT.	Astrid	s Cleaning S	Services	
SUBJECT:	Name of	Limited Liabili	ty Company	
The enclosed Artic	les of Organization and fee(s)	are submitted	for filing.	
Please return all co	rrespondence concerning this	matter to the f	ollowing:	
		Christopher E	. Vasquez	
		Name of	Person	
		F:/C-		
		Firm/Co		
		4518 Declara	ation Drive	
		Addr	ess	
	к	issimmee, Fl	orida 34746	
		City/State an	•	
	E-mail address: (to be us	tridsservices(ion)
For further informati	on concerning this matter, ple			· · · · · · · · · · · · · · · · · · ·
Christo	pher Vasquez	321	895-3547	
-	Name of Person	Area Code	Daytime Telephon	e Number
Enclosed is a check	for the following amount:			
■\$125.00 Filing F	Tee □\$130.00 Filing Fee Certificate of Status	Certific	5.00 Filing Fee & ed Copy at copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>N</u>	1ailing Address		Street Address	
	lew Filing Section		New Filing Section Di	
	Division of Corporations 2.O. Box 6327		The Centre of Tallaha 2415 N. Monroe Stre	
	allahassee, FL 32314		Tallahassee, FL 3230	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
he name of the Limited Lia	ability Company is:		
	Actride	Cleaning Serv	ione 4.1.\C
(Must	contain the words "Limited		
`		,	
RTICLE II - Address:	ut address of the principal of	office of the Li	imited Liability Company is:
ne mannig address and sur	set address of the principal c	office of the La	inned Clabinty Company is.
<u>Pri</u>	ncipal Office Address:		Mailing Address:
4518 Declaration	n Drive, Kissimmee, FL 3474	46	4518 Declaration Drive, Kissimmee, FL 3474
			
DTICLE III Decistance	Amount Domintowed (169a)	9. Doglatovo	A Acentia Clamatura
	Agent, Registered Office,		
			gent. You must designate an individual or
nother business entity with	an active Florida registration	on.)	
he name and the Florida st	reet address of the registered Christopher E. Vasq	-	
	Chinatopher E. Vasq	Name	
	4518 Declaration Dri	ive	
	Florida street addres		IOT acceptable)
	Kissimmee	Florida	34746
	City	State	Zip
ice designated in this certifi ther agree to comply with t	cate. I hereby accept the app he provisions of all statutes r	pointment as re relating to the p	for the above stated limited liability company at the egistered agent and agree to act in this capacity. It proper and complete performance of my duties, and agent as provided for in Chapter 605, F.S
	<u> </u>	<u>''''</u>	o (DECLUDIO)
	Regis	tered Agent's S	Signáture (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

<u>itle:</u>		Name and Address:	
	thorized Member		
'MGR" = Man	ager		
MGR		Christopher E. Vasquez	
		4518 Declaration Drive	
		Kissimmee, Florida 34746	
		<u></u>	
			.
-			
	<u> </u>		
ilse attachmer	t if necessary)		
ctive date is list filing.) he date inserte	sted, the date must b	date of filing: 02/09/2023 (OPTION e specific and cannot be more than five business days prion on meet the applicable statutory filing requirements, this days of the statutory filing requirements.	r to or 90
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