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PICK-UP WAIT MAIL
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## COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: (Voss (Veek (vin Laundry Name of Limited Liability Company)	L
The enclosed Articles of Organization and fee(s) are submitted for filing	
Please return all correspondence concerning this matter to the following:	
Jun Zhung Name of Person	
Cross (reek (oin laundry)	
1210 Capital Circle SE suite I	
Tallahussee FL, 3230/	
Tallahussee FL 3230/  Tun Zhang 1111 Qyahod (> M  E-mail address: (to be used for Juture annual report notification)	
For further information concerning this matter, please call	
Jun Zhang at (8) 0 Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□S125.00 Filing Fee □S130.00 Filing Fee & □S155.00 Filing Fee & □S160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  □S125.00 Filing Fee & □S155.00 Filing Fee & □S160.00 Filing Fee, Certified Copy (additional copy is enclosed)	d)

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

VRTICLE 1 - Name: The name of the Limited Liability Company is:
(Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C.")
\RTICLE II - Address: he mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: 1210 Capital Circle SE. Suite I Mailing Address:
Tullahassee, FL (250)
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 nother business entity with an active Florida registration.)
he name and the Florida street address of the registered agent are:
Tun Zhang  Name  1210 Capital Circle S.E.  Florida street address (P.O. Box NOT acceptable)  Tallahablee FL 3230  City State Zip
Name  A decide to the decide t
1210 Capital Circle S.T.
Florida street address (P.O. Box $501$ acceptable)
[alluna)re /L 3250
City State Zip
wing been named as registered agent and to accept service of process for the above stated limited liability company at the we designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I when agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I 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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The name and address of each person authorized to manage and control the Limited Liability Company:

(Use attachment if necessary)  LEV: Effective date, if other than the date of filing.  (OPTIONAL)  feetive date is listed, the date must be specific and cannot be more than five business days prior to or 90 days of filing.  (It is date inserted in this block does not meet the applicable statutory filing requirements, this date will not be limited as effective date on the Department of State's records.  LEVI: Other provisions, if any  REOURED SIGNATURE:    Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 8.17.15.5.F.S.    J.A.			
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