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# COVER LETTER

	ew Filing Sec vision of Co					
SUBJECT		l Professional Cl	caning and	d Maintena	nce of Polk LLC	
SUBJECT	•	Na	me of Lin	nited Liabil	ity Company	
The enclose	ed Articles of	Organization and	I fee(s) are	e submitted	for filing.	
Please retui	n all correspo	ondence concerni	ng this ma	tter to the	following:	
	Warnetta Ye	oung				
				Name of	Person	
	Unique and	Professional Clea	ming and	Maintenan	ce of Polk LLC	
	-			Firm/Co	mpany	
	606 Carver l	)r				
				Addr	ess	
	Lake Wales.	FL 33853				
1	uniqueandpro	fessionaleleaners		•	d Zip Code	
~	1	E-mail address: (t	o be used	for future (	innual report notificati	ion)
For further in	formation co	ncerning this mat	ter, please	call:		
	Warnetta Yo	ung	86 at (		732-0624	
	Nam	e of Person			Daytime Telephon	e Number
Enclosed is	a check for t	he following amo	ount:			
<b>₹</b> \$125.00	Filing Fee	©\$130,00 Fili Certificate of		Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		ig Address			Street Address New Filing Section Di	ivision

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FI, 32314

The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	T	IC	LE	] -	N	am	e:

The name of the Limited Liability Company is:

Unique and Professional Cleaning and Maintenance of Polk LLC

(Must conatin 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:
606 Carver Dr	606 Carver Dr
Lake Wales, FL 33853	Lake Wales, FL 33853

### 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:

	Name	
606 Carver Dr		
Florida street addre	ess (P.O. Box <u><b>NOT</b></u> ac	cceptable)
Lake Wales	FL	33853

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 (REQUIRE)

(CONTINUED)

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# ARTICLE IV-

•

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

	tyen Member			
"AMBR" = Author "MGR" = Manager	r			
-	•	Worm May V. anna		
<u>AMBR</u>	<del></del>	<u>Warnetta Young</u> 606 Carver Dr		
		Lake Wales, FL 33853		~
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(Use attachment if i LE V: Effective date	if other than the da		(OPTIONAL	) or 90 day
LE V: Effective date ffective date is listed. e of filing.) If the date inserted in	this block does no	specific and cannot be more than five busine of meet the applicable statutory filing requiren	ess days prior to	or 90 day
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CLE V: Effective date  ffective date is listed.  e of filing.)  If the date inserted in rument's effective date  CLE VI: Other provision  REQUIRED SIGN  This	this block does not the on the Departme ons, if any.  NATURE:  Signature of a is document is exem aware that any factors.	specific and cannot be more than five businesses the applicable statutory filing requirement of State's records.	a member.	or 90 day
CLE V: Effective date  ffective date is listed.  e of filing.)  If the date inserted in rument's effective date  CLE VI: Other provision  REQUIRED SIGN  This	this block does not the on the Departme ons, if any.  NATURE:  Signature of a is document is exem aware that any factors.	member of an authorized representative of cuted in accordance with section 605.0303 (1) alse information submitted in a document to the tree felony as provided for in s.817.155, F.S.	a member.	or 90 day

Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)