Division of Corporations Electronic Filing Cover Sheet

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To:

From:

Division of Corporations

Fax Number : (850)617-6381

Account Name : SOSME ACCOUNTING & TAX SERVICES LLC

Account Number : I20200000102 Phone : (954)998-1035 Fax Number : (954)573-1480

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

JUL 19 AM 8: 12

FLORIDA LIMITED LIABILITY CO. CLEANING SERVICES BLANQUITA LLC

Certificate of Status	1
Certified Copy	0
Page Count	UI
Estimated Charge	\$130.00

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COVER LETTER

TO: 8	New Filing Sc Division of Co	ction orporations				
SUBJEC		G SERVICES BLANQUI	TA LLC			
		Name of Lit	mited Liability Company			
The enclo	sed Articles of	Organization and fee(s) ar	e submitted for filing.			
Please ret	um all corresp	ondence concerning this m	atter to the following:			
	LUCIA ISA	BELMALDONADO LEI	VA			
			Name of Person			
	CLEANING SERVICES BLANQUITA					
			Firm/Company			
	5125 HARR	RISON STREET				
			Address			
	HOLLYWO	OOD FL 33021				
	Juevoileixa 2	C E@gmail.com	ny/State and Zip Code		· ~	
	*****		for future annual report notificat	ion)	923	
For further i	nformation co	ncerning this matter, please	ealt:	AHA	23 JUL 19	7
	LUCIA MAI	LOONADO 95		1 ·	19 P	
	Nam	e of Person A	ron Code Daytime Telephon	ic Number	: =	C
Enclosed i	s a check for t	he following amount;		<u> </u>		
LI\$125 00) Filing Fee	■\$130.00 Filing Fee & Certificate of Status	C\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Ei\$160.00 Filing Certificate of Sta Certified Copy (additional copy is	tus &	

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

· To: 18506176381 From: 19545731480 Date: 07/18/23 Time: 8:59 PM Page: 03/04

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MANAGER	LUCIA ISABEL MALDONADO LEIVA
	5125 HARRISON STREET
	HOLLYWOOD FL 33021
EV: Effective date, if other than the ctive date is listed, the date must be filling.)	e date of filing:
ctive date is listed, the date must l f filing.)	oe specific and cannot be more than five business days prior to or 90 di not meet the applicable statutory filing requirements, this date will not be
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To: 18506176381 From: 19545731480 Date: 07/18/23 Time: 8:59 PM Page: 04/04

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is

CLEANING SERVICES BLANQUITA 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.

rimcipal Office Address:	<u> Mailing Address</u> :
5125 HARRISON STREET	5125 HARRISON STREET
HOLLYWOOD FL 33021	HOLLYWOOD FL 33021

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:

LUCIA ISABEL MA	LDONADO LEIV	Α
	Name	
5125 HARRISON ST	TREET	
Florida street address	(P.O. Box <u>NOT</u> a	cceptable)
HOLLYWOOD	FL.	33021
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.,

Agent's Signature (REQUIRED)

(CONTINUED)