3000 | Glanda Department of State Division of Corporations

Electronic Filing Cover Sheet

LAZARUS CORPORATE

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

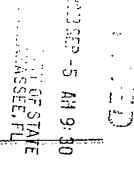
Account Number : I20000000019 : (305)552-5973 : (305)675-5944 Fax Number

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

Email Address:_

FLORIDA LIMITED LIABILITY CO. CLEANING SERVICES SISTERS ELENA LLC

Certificate of Status	1
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Page Count	03
Estimated Charge	\$130.00



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Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A Thomas and	~ * * * • • • • • • • • • • • • • • • • • •
ARTICLE I - Name:	•
The name of the Limited Liability Company is:	
Liability Company is:	
CLEANING SERVICES ARTICLE II - Address:	·
JERUI OF S	GTCTCOC -
APTICITY	215/ERS E/ENA
ARTICLE II - Address:	<u> </u>
The mailing address and street address of the princip	/ / (
Company is. Company is	pal office of the Time.
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20523 Danta Sr, Cuto	•
60523 Nanto A. A. L.	(A 1
ET, CUTC	el Day 32120
	1-1101
	-
ARTICLE III - Registered Agent, Registered Office:	4
The name and the Florid	
The name and the Florida street address of the register company cannot serve as its own Registered Agent. You must designate an inclination 1	arod ago-k
with an active Florida with a first and Registered Agent. You must design as an ind	red agent are: (The Limited Liability
Company cannot serve as its own Registered Agent. You must designate an indi- with an active Florida registration.)	widual or another business entity
010000	
CLAUDIA ELENA CRUZ	/ / ^ ^
COUNTY CAUL	MARTINEZ
70572	
10000 19ANTA 10 PUT	FO DALL ==
20523 MANTA BR, CUTL	ER BAU 33/69
	•
ARTICLE IV	
The name and the control	
The name and title of each person authorized to manage Liability Company: (MGR or AMBR)	e and some let to the
Liability Company: (MGR or AMBR)	se and control the Limited
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Kalin Olana Apris	~ · · · · · · · · · · · · · · · · · · ·
Laura Clena CRUZ M	ARTTNEZ SOLALION
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(Iduara) - FNA COUSTING	(2)
Claudea ELENA CRUZ	YMKTTNIE 2 MILITION
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EIN: 93-3200487

Required Signatures:

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 s.817.155, F.S.

CJAUSTA ELENA ORUZ MARTINEZ.

Typed or printed name of signee

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 (REQUIRED)

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