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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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FLORIDA CAPITAL COURIER SEF	RVICES, INC (850) 524–5437
2330 CLARE DR	(850) 524–6243
TALLAHASSEE, FL 32309	(850) 491–9625
Please use funds from this accou	nt: I20210000160: \$125.00
Authorization Signature:	ubllu
Business Name: A Laundron	nats Holdings 2, LLC.
Document #	
Certified Copy	
Certificate of Status	
NEW FILINGS	AMMENDMENTS
Profit Corp	Amendment
Not for Profit	Resignation of R.A. Officer/Director
_XLimited Liability	Change of Registered Agent
Domestication	Revocation of Dissolution
LLLP	MergerArticles of Conversion
CORP	Articles of Conversion
Other	Restated Articles of Incorporation
Other	Statement of Authority
OTHER FILINGS	REGISTRATION/QUALIFICATIONS
Apostille	Foreign Filing
Country	Reinstatement
	Qualification
	Annual Report
	Fictitious Name

EXAMINER'S INITIALS:____

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2330 CLARE DR	(850) 524–6243
TALLAHASSEE, FL 32309	(850) 491–9625
Please use funds from this according Authorization Signature:	count: 120210000160: \$125.00
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Apostille	Foreign Filing
Country	Reinstatement
	Qualification
	Annual Report
	Fictitious Name

EXAMINER'S INITIALS:____

COVER LETTER

	lew Filing Sec Division of Cor							
SUBJECT		mats Holdings 2	LLC.					
Jobate	·	Na	me of Limite	d Liabil	ity Company			
The enclos	sed Articles of	Organization and	l fee(s) are su	bmitted	for filing.			
Please retu	ırn all correspo	ondence concerni	ng this matter	to the f	ollowing:			
	Keith Diamo	ond						
	<u>. </u>		N	ame of	Person			
	Keith D. Dia	mond, P.A.						
			F	irm/Co	mpany			
	3440 Hollyw	ood Blvd,Suite -	115					
				Addr	ess			
	Hollywood, l	Florida 33021						
	PZ . 's1. 3'	20. 1	City/	State an	d Zip Code	-		
	Keithdiamond E		o be used for	future a	nnual report notificati	on)	-	20
For further i		ncerning this mat			•	Í		9- NN 1202
	Keith Diamor	nd	954 at (618-1008		3.75	1-6 NI
	Name	e of Person	Area	Code	Daytime Telephone	e Number	一宮(1 四 _で	MI 9
Enclosed is	s a check for th	e following amo	unt:				(T) - (T) - (() ()	VIII 3: #1
≣\$125.00	Filing Fee	□\$130.00 Fili Certificate of \$	Status	Certific	5.00 Filing Fee & ed Copy al copy is enclosed)			us &
	New Fi Divisio	g Address ling Section n of Corporation ox 6327	s		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree	ssee		

Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A Laundromats Ho (Must co	oldings 2, LLC. ntain 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 L	iability Company is:	
Princ	ipal Office Address:		Mailing Address:	:
3815 North Hwy U	JS1	PO Bo	ox 541535	
Unit C7 and C10		Merri	t Island, Florida 32954	
Cocoa, Florida 329	<u> </u>			
•	n active Florida registration active Florida registered		-	
•	-	d agent are:		
·	et address of the registere	d agent are:		
•	et address of the registere	d agent are: P.A. Name		
•	Keith D. Diamond, I	d agent are: P.A. Name	eptable)	
he name and the Florida stree	Keith D. Diamond, I 3440 Hollywood Bly Florida street addres	d agent are: P.A. Name vd. Suite 415 ss (P.O. Box <u>NOT</u> acc	12021	. 2
The name and the Florida stree	Keith D. Diamond, I 3440 Hollywood Bly Florida street addres	d agent are: P.A. Name vd. Suite 415 ss (P.O. Box <u>NOT</u> acc	12021	2024. TA
another business entity with an another business entity with an The name and the Florida streed aving been named as registered lace designated in this certifical arther agree to comply with the familiar with and accept the complant of the familiar with and accept the complexity.	Keith D. Diamond, I 3440 Hollywood Bly Florida street addres Hollywood City d agent and to accept serve, I hereby accept the approvisions of all statutes r	d agent are: P.A. Name vd. Suite 415 ss (P.O. Box NOT acc Horida State vice of process for the acc cointment as registered accelerating to the proper acceleration.	33021 Zip bove stated limited liability agent and agree to act in the and complete performance of	is capacity. [6] my duties, and [7] 5, F.S
The name and the Florida stree aving been named as registered ace designated in this certifican rther agree to comply with the	Keith D. Diamond, I 3440 Hollywood Bly Florida street addres Hollywood City d agent and to accept serve, I hereby accept the approvisions of all statutes r	d agent are: P.A. Name vd. Suite 415 ss (P.O. Box NOT acc Horida State vice of process for the acc cointment as registered accelerating to the proper acceleration.	33021 Zip bove stated limited liability agent and agree to act in the and complete performance of	is capacity. It my,duties, and I

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager		
MGR	Steven Candelaria	
	PO Box 541535 Merritt Island, Florida 32954	
MGR	Mavelin Candelaria	
	PO Box 541535 Merritt Island, Florida 32954	
		
(Use attachment if necessary)		
	the date of filing: (C	
If an effective date is listed, the date mus he date of filing.)	st be specific and cannot be more than five business da	ays prior to or 90 days after
Note: If the date inserted in this block do	es not meet the applicable statutory filing requirements	
he document's effective date on the Depa	intent of State's records.	
RTICLE VI: Other provisions, if any.		-6
		1M
REQUIRED SIGNATURE:		9.47
This document is	of a member or an authorized representative of a most executed in accordance with section 605.0203 (1) (b),	Florida Statutes.
I am aware that a constitutes a third	any false information submitted in a document to the Depth degree felony as provided for in s.817.155, F.S.	partment of State

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

Keith D. Diamond, as Agent
Typed or printed name of signee

\$ 5.00 Certificate of Status (Optional)