10.4.24

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To:			ί
	Division of Co	prporations	1,
	Fax Number	: (850)617-6381	
From:		-	<u> </u>
2•	Account Name	: TAXPEOPLE LLC	HAS
	Account Number	: I20200000160	
	Phone	: (772)460-1000	(A)
	Fax Number	: (772)777-3071	'سرَ
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		ss for this business entity to be us ings. Enter only one email address	
Ema	ail Address:		

FLORIDA LIMITED LIABILITY CO. FARIA'S CLEANING SERVICES, LLC

Certificate of Status	0
Certified Copy	0
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COVER LETTER

TO:	New Filing Section
	Division of Corporations

٠.

	FARIA	'S CLI	EANING	SERVICES,	LLC
SUBJECT:				•	_
	N	ame of Lir	nited Liabil	ity Company	
The enclosed Artic	les of Organization a	nd fee(s) a.	re submitted	for filing.	
Please return all co	rrespondence concerr	ning this m	atter to the	following:	
			Claudio To	ledo Ribeiro	
			Name of	Person	
			TAXPEOF	PLE, LLC	
			Firm/Co	mpany	•
			2855 SW E	Brighton St	
****			Addr	ess	
			Port St Luc	ie, FL 34953	
		C	ity/State an	d Zip Code .	
				eoplefi.com	
	E-mail address:	(to be used	for future a	nnual report notifica	tion)
For further information	on concerning this m	aπer, pleas	se call:		
Claudio	Toledo Ribeiro	at (772)	460.1000 .	
	ne of Person for the following am	-	Area Code	Daytime Telephon	e Number
≘ \$125.00 Filing F	ee 🔲 \$130.00 Fil Certificate of	ling Fee & Status	Certific	5.00 Filing Fee & ed Copy al copy is enclosed)	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

FARIA'S CLEANING SERVICES, 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:

Principal Office Address:

Mailing Address:

2255 Friday Ct #225 west Melbourne, FL 32904 2255 Friday Ct #225 West Melbourne, FL 32904

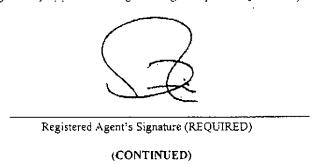
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

	TAXPEOPLE, LLC	Ξ
	Name	
2	855 SW Brighton S	3t
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
Port St Lucie	FL	34953
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..



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<u>Title:</u> "AMBR" = Aut "MGR" = Mana	horized Member eger	Name and Address:
AMBR		First Name: ROSILENE DA SILVA Last Name: FARIA Address: 2255 Friday Ct #225 City/State/Zip: West Melbourne, FL 32904
(Use attachmen	• ,	
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