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TO:

Registration Section
Division of Corporations

Total Janitorial Facility Solutions, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

r lease return air correspondence concerning this matter to the ton	lowing:				
Lorri Stevenson					
Name	of Person				
Richie & Gueringer, P	.C.				
Firm/0	Company				
100 Congress Avenue	e, Suite	1750			
Ac	ddress				
Austin, Texas 78701			****	四	
City/State	and Zip Code			arria ulim	4.2
lstevenson@rg-austin	.com			HOY -7	**
E-mail address: (to be used for	future annual rep	ort notification)	<u> </u>	1	1
For further information concerning this matter, please call:				P.C	1
Lorri Stevenson	, 512	236-9220	E STA	ယ္	1
Name of Contact Person	Area Code	Daytime Telephone N	lumber -	ယ	
Division of Corporations Registration Section P.O. Box 6327 Division of Registration Registration Registration Pile R	lding utive Center Circ	ile			
Enclosed is a check for the following amount:					
■ \$125.00 Filing Fee	\$155.00 Filing Certified Copy				!

**Please send me the acknowledgment letter in the enclosed return envelope.

Thank you.

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Total Janitorial Facility Solutions, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or " TFS, LLC	LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name Liability Company," "L.L.C," or "LLC,")	e must include "Limited
2. Texas 3. 47-2100449	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicab	le)
4. N/A	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
_{5.} 1880 NW 107th Avenue	
Plantation FL 33322	
(Street Address of Principal Office) 6. 1856 N. Nob Hill Rd. #126	(5) TO (6)
Plantation, FL 33322-6548	
(Mailing Address)	कुल च
7. The name, title or capacity and address of the person(s) who has/have authority to man	nage is/are:
Magdalena Mendez, Manager, 1856 N. Nob Hill Rd. #126, Plantation, FL	33322-6548
Ann E. Farrar, Manager, 1856 N. Nob Hill Rd. #126, Plantation, FL 3	33322-6548
8. Attached is an original certificate of existence, no more than 90 days old, duly authentic having custody of records in the jurisdiction under the law of which it is organized. (A phaceeptable. If the certificate is in a foreign language, a translation of the certificate under comust be submitted)	otocopy is not
Rapdalin Deda	_
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury the	nat the facts stated herein are true

Magdalena Mendez

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	the Limited Liability (Company is:		
Total Jar	nitorial Facility	/ Solutions, LLC		
If unavailable, t		in the state of Florida is:		
2. The name ar	nd the Florida street add	dress of the registered agent and office are:		
	C T Corpora	tion System	PON HIE	(122)
		(Name)		
	1200 South I	Pine Island Road		6.3
	Florida Stre	eet Address (P.O. Box NOT ACCEPTABLE)	_ 등성 수	e le
	Plantation	33324	हान च	>

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, Florida Statutes.

(Signature)

City/State/Zip

Jenifer Vincent

Vice President & Assistant Secretary

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)\$ 5.00 Certificate of Status (optional)

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



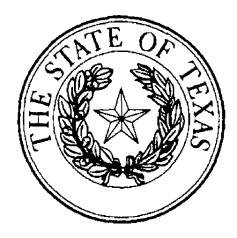
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Total Janitorial Facility Solutions, LLC (file number 802079082), a Domestic Limited Liability Company (LLC), was filed in this office on October 09, 2014.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 06, 2014.



NANDITA BERRY

Nandita Berry Secretary of State

Fax: (512) 463-5709 TID: 10264 Dial: 7-1-1 for Relay Services Document: 576809170002

Phone: (512) 463-5555 Prepared by: SOS-WEB