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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : DMG FINANCIAL SERVICES INC

Account Number : I20230000151 Phone : (305)595-2407 Fax Number : (305)595-2408

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. MELA STAR CLEANING SERVICES LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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Corporate Filing Menu

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COVER LETTER

SUBJECT	MELA STAR CLEANING SERVICES LLC
SOBJECT	Name of Limited Liability Company
The enclos	ed Articles of Organization and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	MARIA E RUIZ
	Name of Person
	DMG TAX SERVICES INC
	Firm/Company
	7750 SW 117TH AVE SUITE 203
	Address
	MIAMI FLORIDA 33183
	City/State and Zip Code MARIAQUIROS9@HOTMAIL.COM
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	MARIA RUIZ 305 595-2407
	Name of Person Area Code Daytime Telephone Number
Enclosed i	is a check for the following amount:
S125.00 F	Siling Fee Status Statu

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

MELA STAR CLEANING SERVICES LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE 11 - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
14701 Bartram Park Blvd Apt 1117	
Jacksonville, Florida 32258	

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:

Melissa Ramos Alvi		
	Name	
14701 Bartram Park	Blvd Apt 1117	
Florida street addres	s (P.O. Box NOT acc	eptable)
Jacksonville	Florida	32258
	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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

25 JAN 17 AM 7: 37

	Name and Address:	
"AMBR" = Authorized Member		1
"MGR" = Manager	14 12 B A1	
MGR	Melissa Ramos Alvaroz 50%	ł
	14701 Bartram Park Blvd Apt 1117 Jacksonville, Florida 32258	
	Jacksonville, Florida 32238	
mgr	Joan Alberto Suarez Davila 50%	
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