# ARTICLES OF ORGANIZATION

Corporation Division
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**E-FILED**
Apr 05, 2021
**OREGON SECRETARY OF STATE**

**REGISTRY NUMBER**

180537590

**TYPE**

DOMESTIC LIMITED LIABILITY COMPANY

**1. ENTITY NAME**

JANITORIAL SERVICES LLC

**2. MAILING ADDRESS**

16920 SW LEMONGRASS LN
BEAVERTON OR 97007 USA

**3. PRINCIPAL PLACE OF BUSINESS**

16920 SW LEMONGRASS LN
BEAVERTON OR 97007 USA

**4. NAME & ADDRESS OF REGISTERED AGENT**

VICTOR RUIZ

10470 SW CLYDESDALE PL
PORTLAND OR 97223 USA

**5. ORGANIZERS**

VIANEY OLVERA ISLAS

16920 SW LEMONGRASS LN
BEAVERTON OR 97007 USA

VIANEY OLVERA ISLAS

16920 SW LEMONGRASS LN
BEAVERTON OR 97007 USA

**6. INDIVIDUALS WITH DIRECT KNOWLEDGE**

VIANEY OLVERA ISLAS

16920 SW LEMONGRASS LN
BEAVERTON OR 97007 USA

**7. INITIAL MEMBERS/MANAGERS**

**MEMBER**

VIANEY OLVERA ISLAS

16920 SW LEMONGRASS LN
BEAVERTON OR 97007 USA

**8. DURATION**

PERPETUAL

**9. MANAGEMENT**

This Limited Liability Company will be member-managed by one or more members

I declare, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, managers, members or agents of the limited liability company on behalf of which the person signs. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

By typing my name in the electronic signature field, I am agreeing to conduct business electronically with the State of Oregon. I understand that transactions and/or signatures in records may not be denied legal effect solely because they are conducted, executed, or prepared in electronic form and that if a law requires a record or signature to be in writing, an electronic record or signature satisfies that requirement.

**ELECTRONIC SIGNATURE**

**NAME**

VIANEY OLVERA ISLAS

**TITLE**

OWNER

**DATE SIGNED**

04-02-2021