# L000000/5001

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 HUM

November 28,2000

600003481806--5 -11/30/00--01093--002 \*\*\*\*155.00 \*\*\*\*\*155.00

Sirs:

Please accept this application and check for Clean Bill of Health, L.C.

My name is Lynne V. Olvey

Address: 2311 S. Miami Avenue

Miami, Florida 33129

Phone: 305-854-5154

Thank You, Lynne V. Olvey

Type Voly

OO NOV 30 PH S: 50

Enclosed: 155 of for Filing fee Designation Certified Copy



# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

Clean Bill of Health, L.C.

## **ARTICLE II - Address:**

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

2311 S. Miami Avenue Miami, Florida 33129

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

The name and the Florida street address of the registered agent are:

Name

2311 S. Miami Avenue

Florida street address (P.O. Box NOT acceptable)

Miami FL 33129

City, State, and 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 608, F.S..

Syrue V. Olty
Registered Agent's Signature

# Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

### FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (OPTIONAL)

\$ 5.00 Certificate of Status (OPTIONAL)