

CAPITAL CONNECTION, INC.
417 E. Virginia Street, Suite 10 • Tallahassee, Florida 32301
(850) 224-8370 • 1-800-342-8062 • Fax (850) 224-2222

22530

Master Clean of Palm
Beach LLC

800007452598--3
-08/30/02--01054--001
****125.00 ****125.00

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
☒ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
____ Annual Report / Reinstatement _____
____ Cert. Copy _____
☒ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____
____ Courier _____

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02 AUG 30 PM 12:04

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

W8/30

Signature _____

Requested by: _____

Name

Date

Time

Walk-In _____

Will Pick Up _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MASTER CLEAN OF PALM BEACH, L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 200 West Camino Real, Boca Raton, Florida 33432

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

Deiter Noffke

Deiter Noffke
Signature

200 West Camino Real

Florida Street Address (P.O. Box **NOT** acceptable)

Boca Raton, Florida 33432

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.

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)

Deiter Noffke

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).

DEITER NOFFKE

Typed or printed name of signee

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
AUG 30 2011