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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JOHNSON & JOHNSON CLEANING SERVICES, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pamela Johnson  
(Name of Person)

JOHNSON & JOHNSON CLEANING SERVICES  
(Firm/Company)

8552 LOVIC ROAD  
(Address)

TALLAHASSEE FL. 32311  
(City/State and Zip Code)

For further information concerning this matter, please call:

Patricia A. Singleton at ( 904 ) 383-1940  
(Name of Person) (Area Code & Daytime Telephone Number)

### STREET ADDRESS:

Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

### MAILING ADDRESS:

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

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Johnson + Johnson Cleaning Services, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

Pamela Johnson  
8552 LOVELL ROAD  
TALLAHASSEE, FL. 32311

**Mailing Address:**

Johnson + Johnson Cleaning Serv  
P.O. Box 1316  
TALLAHASSEE, FL. 32362

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

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

Pamela Johnson  
Name  
8552 Lovell Road  
Florida street address (P.O. Box NOT acceptable)  
Tallahassee FL 32311  
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.*

Pamela Johnson  
Registered Agent's Signature

(CONTINUED)

**ARTICLE IV- Manager(s) or Managing Member(s):**

\*The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

PAMELA JOHNSON  
8552 LOVIC Road  
Tallahassee, FL 32362

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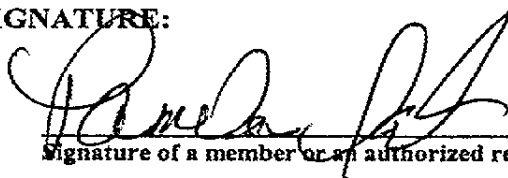
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(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:**



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.)

PAMELA JOHNSON

Typed or printed name of signee