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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : HUBCO
Account Number : 104562003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

LIMITED LIABILITY COMPANY

Sparkling ServicesLLC

| | |
|-----------------------|----------|
| Certificate of Status | 1 |
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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name

The name of the Limited Liability Company is: **Sparkling Services LLC**

ARTICLE II - Address

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

Principal Office Address:

1204 Brenau Terrace

Panama City, FL 32405-3615

Mailing Address:

1204 Brenau Terrace

Panama City, FL 32405-3615

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

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

Vickie Shaeffer

Name

1204 Brenau Terrace

(P.O. Box or Mail Drop Box NOT Acceptable)

Panama City, FL 32405-3615

(City / 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 608, F.S.

X

Vickie Shaeffer
Registered Agent's Signature - Vickie Shaeffer

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

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Vickie Shaeffer - 1204 Brenau Terrace Panama City, FL 32405-3615

MGRM

Tammy Stephenson - 734 East Pine Forrest Dr. Lynn Haven, FL 32444

(Use attachment if necessary)

REQUIRED SIGNATURE:

X


Signature of a member or 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.)

Tammy Stephenson

Typed or printed name of signee

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