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SECRETARY OF STATE ONS

TRANSMITTAL LETTER

	Registration Section Division of Corporations					
SUBJEC	CT: Brians Pressure Cleaning a LLC. (Name of Limited Liability Company)					
The encl	losed Articles of Organization and fee(s) are submitted for filing.					
	Please return all correspondence concerning this matter to the following:					
	Brian Hess (Name of Person)					
	(Name of Person)					
	Brians Pressure Cleaning (Firm/Company)	_				
	(Firm/Company)	-				
_	2704 BUCKThornway					
	(Address)					
	NAPLES Fla. 34105 (City/State and Zip Code)					
	(City/State and Zip Code)					
For furth	her information concerning this matter, please call:					
	Brian Hess " 239 293 2664	£				

STREET ADDRESS:

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

(Name of Person)

(Area Code & Daytime Telephone Number)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Brians Pressure Cleaning a LLC	2.
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability	
Principal Office Address: Mailing Address:	
2704 Buckthornway SAME	
Naples Fla. 34105	· .
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Sign	ature:
The name and the Florida street address of the registered agent are:	4
Brian D Hess	APR APR
Name	一是
2704 Buckthornway Naples Fla. 34105 Florida street address (P.O. Box NOT acceptable)	ED OF STATE REORATIO
N Aples Fla. 34105 FLORIDA City, State, and Zip	0 0HS

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, Florida Statutes..

Bru Hess Registered Agent's Signature

Page 1 of 2 (CONTINUED)

	The name and address of each Manager	ch Manager or Managing Member is as follows:		
,	Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
DWNER	MGR	Brian Hess 2704 Buckthornway Naples Fla. 34105		>(
	MGRM	LIANE MCMILLAND 170 Turtu Lake Et 303 Naples FI 34105	<u></u>	- وم <u>رسم</u> بالعمل ال
	MGRM	Walter ADAM Hess 2704 BuckThornuny Naples Fla. 34105		- ·
	(Use attachment if necessary)		O4 APR 14	SECRE
	NOTE: An additional article must be REQUIRED SIGNATURE:	added if an effective date is requested.	PM	FILED TARY OF S
	(In accordance with section 608 of this document constitutes an a that the facts stated herein are tr	— 1	4:20	STATE RATIONS
	Brian Hes	<i>:s</i>		

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

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)

Typed or printed name of signee