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STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

JUN - 9 2004

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: A-Nelson Cleaning Service 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:

Tonya Kay Nelson
(Name of Person)

A-Nelson Cleaning Service
(Firm/Company)

P.O. Box 642
(Address)

Woodville FL 32362
(City/State and Zip Code)

For further information concerning this matter, please call:

W. Kay Nelson at (880) 402-62167
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 JUN -9 AM 11:22

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED STATE SECRETARY TALLAHASSEE, FLORIDA 04 JUN -9 AM 11:22

ARTICLE I - Name:

The name of the Limited Liability Company is:

A-Wilson Cleaning Service LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2407 OAKRIDGE Rd. E.
TALL. FL. 32305-1701

PO. Box 642
Woodville, FL. 32362

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

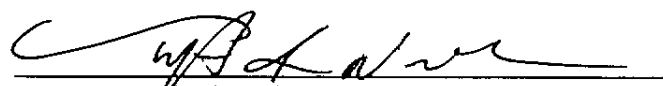
The name and the Florida street address of the registered agent are:

TONYA K WILSON A-Wilson Cleaning Service
Name

2407 OAKRIDGE Rd. E.
Florida street address (P.O. Box NOT acceptable)

TALLAHASSEE FL FL. 32305-1701
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..


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

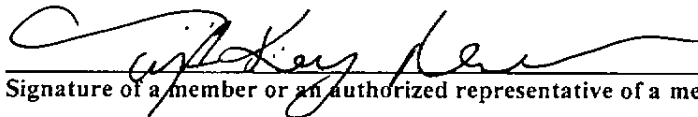
Tonya Kay Nelson
1 PO Box 642
Woodville Fla 32362.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
04 JUN -9 AM 11:22

(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.)

Tonya Kay Nelson
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)