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DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

TO:

Registration Section

Tallahassee, Florida 32399

409 E. Gaines Street

r	Division of Corporations			
SUBJEC	T: Full Line Cl (Name o	Earling Service f Limited Liability Company)	LLC	
	sed Articles of Organization and fee(s)			
In	elchars Dadley (Name of Person)		,	
Ful	Line Cleaning (Firm/Company)	Service	* North	
	(Address) (Address) (Address) (City/State and Zip Coo		SEÜNE ÜARY TALLAHASSE	05 JAN 31
For furthe	r information concerning this matter, p	please call:	AHASSEE, FLORIDA	PH 3: 59
rree	Name of Person)	at (\(\frac{\fir}{\frac{\fir}{\frac{\frac{\frac{\frac{\frac{\fracc}\firk}{\firigitita}}}}{\firac{\firi}}}}{\frac{\frac{\fir}{\fir\firac{\fir}{\firighta}}}	lephone Number)	
Enclosed is a che	ck for the following amount:			
□ \$125.00 Filing	g Fee	155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status of Certified Copy (additional copy is enclose	
F	STREET ADDRESS: Registration Section Division of Corporations	Registratio	ADDRESS: n Section Corporations	

P.O. Box 6327

Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Full Line Cleaning Service LLC ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company	is:
	is:
Principal Office Address: Mailing Address:	
27/4 Bel Ford way Tall, FL 32308	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:	
The name and the Florida street address of the registered agent are: Fredcharles Hadley Name Name Proposition of the registered agent are: Name Name	
Florida street address (P.O. Box NOT acceptable) Talahass an FLFL 3230x 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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Men	Name and Address:
MGRM	Fred Hadley 2716 Bestord way Tall, FL 32368
· · · · · · · · · · · · · · · · · · ·	

(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.)

Fredchonles Hadley
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

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\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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