

L05000032/34

Florida Department of State
Division of Corporations
Public Access System

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((H05000078672 3))

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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 222-9428

LIMITED LIABILITY COMPANY

Clenox L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	05 6
Estimated Charge	\$125.00

Please backdate to:
March 31st.
Thanks!

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W05-16535

APR 4 2005



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 1, 2005

C T CORPORATION SYSTEM

SUBJECT: CLENOX I.L.C.
REF: W05000016535

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

Please return your document, along with a copy of this letter, within days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Document SpecialistFAX Aud. #: H05000078672
Letter Number: 405A00022315FILED
2005 MAR 31 AM 8:50
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED

05 APR - 1 AM 11:43

DIVISION OF CORPORATIONS

4/1/05
Please backdate to:
March 31 st.
Thank You!

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CLENOX L.L.C.

(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:

Duke van Kalken

(Name of Person)

CLENOX L.L.C.

(Firm/Company)

3920 RCA Boulevard, Suite 2000

(Address)

Palm Beach Gardens, Fl. 33410

(City/State and Zip Code)

For further information concerning this matter, please call:

CT Corporation System

(Name of Person)

at (800)

) 432-3434

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|---|---|---|

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

FILED
2005 MAR 31 AM 8:50
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

CLENOX L.L.C.**ARTICLE II - Address:**

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

Principal Office Address:3920 RCA Boulevard, Ste. 2000Palm Beach GardensFlorida 33410**Mailing Address:**Same**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Dulce van Kalken

Name

3020 RCA Boulevard, Ste. 20000Florida street address (P.O. Box NOT acceptable)Palm Beach Gardens, FL 33410

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)

Page 1 of 2

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2005 MAR 31 AM 8:50
CLARENCE CORPORATION
TALLAHASSEE, FLORIDA

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:Duke van Kalken "MGR"3920 RCA Boulevard, Ste. 2000Palm Beach Gardens, FL 33410FILED
2005 MAR 31 AM 8:50
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

(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.)

Duke van Kalken

Typed or printed name of signer

Filing Fees:**\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent****\$ 30.00 Certified Copy (Optional)****\$ 5.00 Certificate of Status (Optional)**

Clenox, Inc.

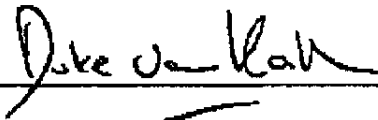
March 31, 2005

To the Secretary of State of Florida

Re: Consent to Use of Name

Clenox Inc. a corporation organized and existing under the laws of the State of Florida, hereby consents to the (organization) of Clenox L.L.C. in the State of Florida.

By



Duke van Kalken
President

FILED
2005 MAR 31 AM 9:50
CLINCH COUNTY, FLORIDA
CORPORATIONS