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, , , , , , , , , , , , , , , , , , , 	(Requestor's Name)
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ACCOUNT NO. : 072100000032

REFERENCE :

128449 435210

AUTHORIZATION :

COST LIMIT : \$ 125.00

ORDER DATE: May 22, 2006

ORDER TIME : 5:25 PM

ORDER NO. : 125449-005

CUSTOMER NO: 4352107

DOMESTIC FILING

NAME:

HUNNY DO CLEANING & MAID

SERVICE, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS:

TORETARY OF STATE

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

HUNNY DO CLEANING & MAID SERVICE, LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "LC,") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 735 SE Monterey Avenue - Unit #9 Stuart, Florida 34994 Stuart, Florida 34994 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature. (The Limited Liability Company cannot serve as its own Registered Agent, You must designate an individual or another business entity with an acrive Florida registration.) The name and the Florida street address of the registered agent are: Corporation Service Company Name 1201 Hays Street Florida street address (P.O. Box NOT acceptable)

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..

City, State, and Zip

Corporation Service Company

Tallahassee, FL 32301

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing N	Name and Address:
MGRM	David Keyser
	1410 The Pointe Drive
	West Palm Beach, FL 33409
MGRM	Paula Keyser
272.72.64.74	1410 The Pointe Drive
	West Palm Beach, FL 33409
	West I ami Deadle TE 33-109
MGRM	Steven Keyser
	1410 The Pointe Drive
	West Palm Beach, FL 33409
(If an effective date is li	date, if other than the date of filing: (OPTIC sted, the date must be specific and cannot be more than or 90 days after the date of filing.)
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(If an effective date is libusiness days prior to o REQUIRED SIC Sig (In of	sted, the date must be specific and cannot be more that or 90 days after the date of filing.) ENATURE: pature of a member or in authorized representative of a member accordance with section 608.408(3), Florida Statutes, the execution this document constitutes an affirmation under the penalties of perjury the facts stated herein are true.)
(If an effective date is libusiness days prior to describe the second se	sted, the date must be specific and cannot be more that or 90 days after the date of filing.) SNATURE: Character of a member or in authorized representative of a member accordance with section 608.408(3), Florida Statutes, the execution this document constitutes an affirmation under the penalties of perjury the facts stated herein are true.) David Keyser Typed or printed name of signee