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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Superior Surfaces pressure washing 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:
Timothy J. Wengierski Jr.  (Name of Derson)  Superior Surfaces pressure washing LLC  (Firm/Company)
(Name of Person)
Superior Surfaces pressure washing LLC
(Firm/Company)
3225 Bernudg rd.
(Address)
Palm Beach Gardens Fl. 33410 20 City/State and Zip/Code)
(City/State and Zip/Code)
Palm Beach Gardens Fl. 334/0  (City/State and Zip/Code)  For further information concerning this matter, please call:
Timo thy Wengierski Jr. at (561) 531-1058 (Name of Person) (Area Code & Daytime Telephone Number)
(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee,
Certificate of Status  Certified Copy  (additional copy is enclosed)  Certified Copy  (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

Superior Surfaces pro (Must end with the words "Limited Liability Company, "Limited	essure washing LLC		
(Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")		
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
3225 Bermuda rd.	3225 Bermuda rd.		
Palm Beach Gardens F1, 33410	Palm Beach Gardens Fl, 33410		
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 active Florida registration.)			
The name and the Florida street address of the registered agent are:			
Timothy John We	ngierski Jr. 2 GRA		
Name -	A ORDER		
3225 Bermuda	ress (P.O. Box NOT acceptable)  ANII: 52		
	ress (P.O. Box NOT acceptable)		
Palm Beach Garden	S <sub>FL</sub> 334/0		
City, State, a	nd 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 (REQUIRED

(CONTINUED)
Page 1 of 2

## The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: April (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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.) Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation

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

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)