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## **COVER LETTER**

TO:	Registration S Division of Co			
SUBJI	ECT: AF	FORDABLE (Name of Limit	CARPET CLEANE 1 ded Liability Company)	R
The en	closed Articles o	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	pondence concerning this matt	ter to the following:	
	Ah	mad M. A)	Name of Person)	-
			(Firm/Company)	_
	3711 5	shamrock St	(Address) Apt G115 To	_
		lahassee }	32309 PEES S	
For fur		(Cit		
	(Name	e of Person)	_ at () <del>\tilde{\t</del>	
Enclos	sed is a check f	or the following amount:		
\$125	.00 Filing Fee	ρ \$130.00 Filing Fee & Certificate of Status	ρ \$155.00 Filing Fee & ρ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	/
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The second discountry company is:		
AFFORDABLE CARPET	CLEANER "	LLC,
(Must end with the words "Limited Liability Company, "Limited Compar	ny" or their abbreviation "LLC," or "	'L.C.,")
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liabil	ity Comp

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

The mailing address and street address of the princi	pal office of the Limited Liability Company is:
Principal Office Address:	lailing Address:
Apt C115 Tallahassee	Same
ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	Agent. You must designate an individual or another
The name and the Florida street address of the regis	tered agent are:
Ahmad M. Al	SAROL EST
3711 Shamrock Florida street address	St. West Apt - 8715 [P.O. Box NOT acceptable]
Talakassel FI City, State, and 2	777. (4)

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)

The name and address of each Manager o	r Managing Member is as follows:		
Title:  "MGR" = Manager  "MGRM" = Managing Member	Name and Address:		
Managing Members	Rami Al SiRou/3711 Shamfock St West Apt. C-115 Tallehassee F. (32309		
Managing Member(s)	Ahmad M. AL Sarou  3711 Shamrock St. West fl 323  Apt. 11=138 C-115 Tallaharrer fl 323		
-Non-			
Non			
(Use attachment if necessary)			
ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL)  (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:	O7 JUN SECNE TALLAH		
Signature of a member or	an authorized representative of a member S		
of this document constitutes that the facts stated herein	608.408(3), Florida Statutes, the execution san affirmation under the penalties of perjury are true.)		
	or printed name of signee		
Filing Rees			

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

\$125.00 Filing Fee for Articles of Organization and Designation

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