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| PICK-UP                 | WAIT              | MAIL        |
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| Certified Copies        | _ Certificates    | s of Status |
| Special Instructions to | Filing Officer:   | 9054        |
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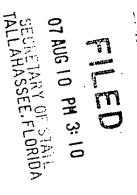
## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 10, 2007

ANGELA T. WILLIAMS 3515 BLUE SPIKE CT TALLAHASSEE, FL 32311-7712

SUBJECT: RENEE'S CLEANING SERVICES, LLC

Ref. Number: W07000039054



We have received your document for RENEE'S CLEANING SERVICES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places.

One or more words may be added to make the name distinguishable from the one operated by the correction of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 607A00049123

## **COVER LETTER**

| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT PANEES CLEANING SERVICES, 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:   |
| ANGELA T. WILLIAMS (Name of Person)   |
| (Firm/Company)  |
| 3515 Blue Sprike CT From  |
| (Address)   |
| TALLAHASSEE, FL 32311-7712  (City/State and Zip Code)   |
| · · · · · · · · · · · · · · · · · · ·   |
| For further information concerning this matter, please call:  |
| Aline (Name of Person) at (850) 878-9713 (Area Code & Daytime Telephone Number)   |
| Enclosed is a check for the following amount:   |
| \$125.00 Filing Fee \$\begin{array}{c} \$130.00 Filing Fee & \$\begin{array}{c} \$155.00 Filing Fee & \$\begin{array}{c} \$160.00 Filing Fee, \$\begin{array}{c} \$Certificate of Status & \$\begin{array}{c} \$Certified Copy & \$Certified Copy & \$\begin{array}{c} \$Certified Copy & \$\begin{array} |
| Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle   |

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

S CLEANING SERVICES LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

| Principal Office Address:   | Mailing Address: |  |
|---|------------------|--|
| 3515 Blue SPRUCE CT.<br>TALLAHASSEE, FL 32311-7712  | SAME AS LBOVE    |  |
| (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of ANGELA T. Wa |                  |  |

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..

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

| <u>Title:</u> "MGR" = Manager "MGRM" = Managing Mem  | Name and Address:  |
|--|--|
| MGRM   | ANGELA T. WILLIAMS<br>3515 BWE SPRICE CT<br>TALLAHASSEE, FL 32311-7712                         |
| MGRM   | ALVIN WILLIAMS ALE STALL, FL 32311-7712H & SSEN  |
|  | PH 3: 10 U) SIAILA E. FLORIDA  |
| (Headttakmont if nooccom   | ·)   |
| (Use attachment if necessary LE V: Effective date, if other ffective date is listed, the date                      | r than the date of filing: (OPTION e must be specific and cannot be more than five business da |
| LE V: Effective date, if other   | e must be specific and cannot be more than five business da                                    |
| LE V: Effective date, if other fective date is listed, the date days after the date of filing.  REQUIRED SIGNATURE | e must be specific and cannot be more than five business da                                    |

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)