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TO:

Registration Section

Division of Co	rporations		•
SUBJECT: KIRBY	CLEANING LIMI	TED LIABILITY COM	PANY
30BJEC1.	(Name of Limit	ed Liability Company)	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this matt	er to the following:	
	EDWIN	IA GAY KIRBY	
<u> </u>	· · · · · · · · · · · · · · · · · · ·	(Name of Person)	
KIRE	BY CLEANING LIN	MITED LIABILITY CO	
		(Firm/Company)	HE NO
	59	53 US 27	-9 ARY
		(Address)	י די
	BRANF	ORD, FL 32008	u: I
	(Cit	y/State and Zip Code)	> N
For further information	concerning this matter, please	e call:	
GAY KIRBY		at (386) 344-461	0
(Name	of Person)	(Area Code & Daytime Tel	ephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & 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 Corporation Clifton Building 2661 Executive Center (Tallahassee, FL 32301	s ·

ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Name:

the Limited Liability Company is:

KIRBY CLEANING LIMITED LIABILITY COMPANY

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

ARTICLE II - Address:

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

Principal Office A	ddress:	Mailing Address:		
5953 US 27		5953 US 27		
BRANFORD, FL 32008		BRANFORD, FL 32008		
(The Limited Liability Co business entity with an a	mpany cannot serve as its own for the Florida registration.) Clorida street address of the EDWINA (No. 1995)	ered Office, & Registered Registered Agent. You must designate the registered agent are: GAY KIRBY fame US 27 et address (P.O. Box NOT accept	TARY OF STATE STATE FLORIDA	
	BRANFO	RD FL 32008	_	
	City, St	iate, 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 (REQUIRED)

(CONTINUED) Page 1 of 2

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

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	•
"MGRM"	EDWINA GAY KIRBY
WGRW	5953 US 27
	BRANFORD, FL 32008
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· · · · · · · · · · · · · · · · · · ·	207 -
	12
(Use attachment if necessary)	
	00/00/07
ICLE V: Effective date, if other that	an the date of filing: 08/08/07
	nust be specific and cannot be more than five business days
90 days after the date of filing.)	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

> **EDWINA GAY KIRBY** Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)