L08000018065

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
, , , , ,				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
2015 Gray GAVE				
PHONE TO				
XXRECT Left date				
DATE 2/30/00				
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Office Use Only



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Effective Date 2/8/08

OIVISION OF CORFORATIONS

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B. Tadlock FEB 20 2008

COVER LETTER

Division of Corporations
SUBJECT: Cleaning by CJ LLC (Name of Resulting Florida Limited Company)
The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.
Please return all correspondence concerning this matter to:
Lois Gray (Contact Person)
Professiona) Business Service (Firm/Company)
104 S.W. 3rd Avenue
Okeehobee FL 34974-4217 (City. State and Zip Code)
For further information concerning this matter, please call:
Lois Gray at (863) 763-4591 (Name of Contact Person) (Area Code and Daytime Telephone Number)
Enclosed is a check for the following amount:
\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Certificate of Conversion For "Other Business Entity" Into Florida Limited Liability Company



This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this					
Certificate of Conversion is:					
Cleaning by CJ. Inc. 400-1962at, all					
Certificate of Conversion is: (Leaning by CJ Inc. PO8-135320 (Enter Name of Other Business Entity) (Enter Name of Other Business Entity)					
2. The "Other Business Entity" is a <u>corporation</u> .					
(Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.) first organized, formed or incorporated under the laws of					
on 02-04-2008					
(Enter date "Other Business Entity" was first organized, formed or incorporated)					
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:					
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:					
(Enter Name of Florida Limited Liability Company)					
(Enter Name of Florida Limited Liability Company)					

Page 1 of 2

5. If not effective on the date of filing, enter the effective date: 2/8/08 (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)
Signed this 12th day of February 2008
Signature of Authorized Person: Cynthia Bowman
Printed Name: Cynthia Bowmon Title: President/Manager

Fees:

Certificate of Conversion:

\$25.00

Fees for Florida Articles of Organization:

\$125.00

Certified Copy:

\$30.00 (Optional)

Certificate of Status:

\$5.00 (Optional)

Page 2 of 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na	me:			
The name of the L	imited Liability Company	S:		
(Must end with the word "LLC.")	s "Limited Liability Company." the	abbreviation "L.L.C.," or the designation		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office A	Address:	Mailing Address:		
1402 NE 39 Okcechobee	# Blvd. FL 34972-8628	1402 NE 39th Blv Okeechobee FL 34972	8038 8038	
Signature: (The Limited Liability C	Florida street address (P.	red Office, & Registered Agent gistered Agent. You must designate an e registered agent are: me Avenue O. Box NOT acceptable) FL 34974-4217 ate, and Zip	i's JS	
Havina heen va	med as registered agout and	to accent service of process for	the	

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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:				
Mar	Curthia Bourson				
	Cynthia Bowman 1402 NE 3970 Blvd.				
	Okeechobee FL 3492-8628				
	,				
	<u> </u>				
	(Use attachment if necessary)				
ARTICLE V: Effective date, if other than the date of filing: 02-18-2008 (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:					
	-				
Signature of a member or an auth	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.)					
<u>Cynthia Bown</u> Typed or printed	an				
Typed or printed	d name of signee				
Filing Fees:	N.				
\$125.00 Filing Fee for Articles of C	Organization and Designation				
of Registered Agent					
\$ 30.00 Certified Copy (Optional)					
\$ 5.00 Certificate of Status (Option	onai)				