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	(Requ	estor's Name	,
	(Addre	ess)	
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	(City/S	State/Zip/Phor	ne #)
PICK-U	ΙP	☐ WAIT	MAIL
	(Busin	ess Entity Na	me)
<u>. </u>	(Docu	ment Number)
Certified Copies		Certificate	es of Status
Special Instruction	s to Fili	ing Officer:	
		A. L	UNT

Office Use Only

APR -8 2008

EXAMINER



100122285561

04/07/08--01026--011 **125.00

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: REALLY BIG CLEAN 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:	
LOURDES M. ENSENAT (Name of Person)	
REALLY BIG CLEAN (Firm/Company)	
5941 5 W. 18 STREFE	
MIANI FL 33155 & F	П —
(City/State and Zip Code)	П
For further information concerning this matter, please call:	J
LOURDES M. ENSENAT at (305) 799-9759 & (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\bigsquare \text{\$130.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
REALLY BIG CLEAN "LLC" (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 Address: Mailing Address:
5941 S.W. 18 ST. MIANI FL 33155 MIANI FL 33155
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:
LOURDES M. ENSENAT FOR SARY 15 15 15 15 15 15 15 15 15 15 15 15 15
Florida street address (P.O. Box NOT acceptable)
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: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (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 of an authorized representative of a member.

Typed or printed name of signee

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

OURDES M. ENSENAT

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)