

May 01 2008 10:44 AM

EXECUTIVE CORP. FILING

305 670 2055

P.1

Division of Corporations

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Florida Department of State  
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Effective Date 04/30/08

From:  
Account Name : EXECUTIVE CORPORATE FILING, INC.  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**HIGH STANDARD CLEANING SERVICE, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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J. BRYAN

MAY - 2 2008

EXAMINER

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

HIGH STANDARD CLEANING SERVICE, 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:**4844 CYPRESS WOODS DR APT. 383  
ORLANDO, FL 32811**Mailing Address:**4876 CYPRESS WOODS DR APT. 126  
ORLANDO, FL 32811**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:

Effective Date 04/30/08NIEDJA AGRA ARAUJO

Name

4876 CYPRESS WOODS DR APT. 126Florida street address (P.O. Box NOT acceptable)ORLANDO, FL 32811

City, State, 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)

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**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:**

MGRM

NIEDJA AGRA ARAUJO

4070 CYPRESS WOODS DR APT 120

ORLANDO, FL 32811

MGRM

NUBIA AGRA DA SILVA

4876 CYPRESS WOODS DR APT 120

ORLANDO, FL 32811

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 04/30/2008 (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 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.)

NIEDJA AGRA ARAUJO

Typed or printed name of signee