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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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M. THOMAS

JUL 172008

EXAMINER

COVER LETTER

TO: Registration So Division of Co			
SUBJECT: Stirlin	g Sweepers & \$	Scrubbers L.L.C.	
		ed Liability Company)	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all corresp	ondence concerning this mat	ter to the following:	
David Ho	ule		
		(Name of Person)	
Stirling S	Sweepers & Scr	ubbers, L.L.C.	
		(Firm/Company)	
18375 10	04th Terrace Sc	outh	
		(Address)	
Boca Ra	ton, Fl. 33498		
	(Cit	y/State and Zip Code)	TALL SE
For further information	concerning this matter, please	e call:	SECHETARY OF STATE
David Houle		at 954 \ 520-0003	
	of Person)	at (954) 520-0003 (Area Code & Daytime Telephone Number)	15 SIN 15 SIN 15 SIN
Enclosed is a check for	or the following amount:		DH 56
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing For Certificate of State Certified Copy (additional copy is enclosed)	tus &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	rici	JE I	_ N	ame
Δ			- 14	

The name of the Limited Liability Company is:

Stirling Sweepers & Scrubbers L.L.C.

(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:	
18375 104th Terrace South	18375 104th Terrace South	
Boca Raton	Boca Raton	
Florida 33498	Florida 33498	

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:

David Houle
Name

18375 104th Terrace South

Florida street address (P.O. Box NOT acceptable)

Boca Raton, Fl. 33498

City, State, and Zir

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 **David Houle**

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

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

(Use attachment if necessary)

Title:

MGR

"MGR" = Manager

"MGRM" = Managing Member

ARTICLE V: Effective date, if other than the date of filing: $\frac{7/14/08}{}$ (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.)

David Houle

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)

\$ 5.00 Certificate of Status (Optional)