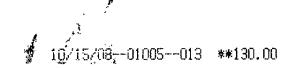
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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	······································
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(D.,	ain and Entitle Name	
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
O-46-4 O-4;	0-15-1	- 7 Olahar
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



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SECRETARY OF STATE
ORIO

C. LEWS OCT 1 6 2008 EXAMINER

COVER LETTER

TO:	Registration S Division of Co				•
SURI	ECT: Absolu	ute Finest Cleanin'	Service		
3010			ed Liability Compa	ny)	
The er	nclosed Articles o	of Organization and fee(s) are	submitted for filing		
Please	return all corres	pondence concerning this mat	ter to the following:	:	
	Rebecca	D. Turner			
	**************************************	***************************************	(Name of Person)		
	Absolute	Finest Cleanin' Se	rvice		
			(Firm/Company)		
	1516 Mai	ne Ave 101-D			
			(Address)		
	Lynn Hav	en, Florida 32444			
		(Cit	y/State and Zip Code)	
For fu	urther information	concerning this matter, pleas	e call:		
10114		toones, press			_
Reb	ecca Turn		_at (850	348-284	
	(Nam	e of Person)	(Area Code	& Daytime Tele	phone Number)
Enclo	sed is a check f	or the following amount:			
□\$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Copy (additional copy	ру	\$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	Registrati Division Clifton B 2661 Exe	ourier Address on Section of Corporations uilding cutive Center C ee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

	Service "LLC" ds "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street	dress of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1516 Maine Avenue 101-D	1516 Maine Avenue 101-D
Luna Hausa, Elarida 20444	
(The Limited Liability Company cannot s	nt, Registered Office, & Registered Agent's Signature: re as its own Registered Agent. You must designate an individual or another ration.)
ARTICLE III - Registered Ag (The Limited Liability Company cannot s business entity with an active Florida reg	nt, Registered Office, & Registered Agent's Signature: re as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are:
ARTICLE III - Registered Ap (The Limited Liability Company cannot s business entity with an active Florida reg The name and the Florida stree	nt, Registered Office, & Registered Agent's Signature: re as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are:
ARTICLE III - Registered Ag (The Limited Liability Company cannot s business entity with an active Florida reg The name and the Florida stree Rebecca	nt, Registered Office, & Registered Agent's Signature: re as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are:
ARTICLE III - Registered Ag (The Limited Liability Company cannot s business entity with an active Florida reg The name and the Florida stree Rebecca	nt, Registered Office, & Registered Agent's Signature: re as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are:
ARTICLE III - Registered Ag (The Limited Liability Company cannot s business entity with an active Florida reg The name and the Florida stree Rebecca	nt, Registered Office, & Registered Agent's Signature: re as its own Registered Agent. You must designate an individual or another ration.) ddress of the registered agent are: Furner Name Name Name

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	
"MGR"	Rebecca Dawn Turner
	1516 Maine Avenue 101-D
	Lynn Haven, Florida 32444
"MGRM"	Edward Alexander Williams
	1516 Maine Avenue 101-D
	Lynn Haven, Florida 32444
The state of the s	
LE V: Effective date, if other than the	e date of filing: (OPTION
ffective date is listed, the date must be days after the date of filing.)	e date of filing: (OPTION e specific and cannot be more than five business da
LE V: Effective date, if other than the ffective date is listed, the date must b	
LE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with see	e specific and cannot be more than five business de La Luce et or an authorized representative of a member. Cotion 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury
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LE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document const that the facts stated is that the facts stated is EBECT. Filing Fees: \$125.90 Filing Fee for Articles of Organ of Registered Agent	er or an authorized representative of a member. ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury herein are true.) A TURNER ped or printed name of signee
ELE V: Effective date, if other than the frective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document const that the facts stated by EBECOTY Filing Fees: \$125.00 Filing Fee for Articles of Organical Control of the c	er or an authorized representative of a member. action 608.408(3), Florida Statutes, the execution ditutes an affirmation under the penalties of perjury therein are true.) A TURNER oped or printed name of signee