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| (Requestor's Name) | | |
|---|--|--|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP WAIT MAIL | | |
| | | |
| (Business Entity Name) | | |
| (Document Number) | | |
| Certified Copies Certificates of Status | | |
| Special Instructions to Filing Officer: | | |
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Office Use Only

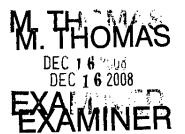


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SECRETARY OF STATE TALLAHASSEE. FLORIDA

08 0EC 15 AH 10-19



COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|--------------|
| SUBJECT: The Every Detail, 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: | |
| Maria Barnaky (Name of Person) | |
| (Firm/Company) | _ |
| 12815 Pinctorest Way W. | |
| Larso FL 33773 (City/State and Zip Code) | _ |
| For further information concerning this matter, please call: | |
| Maria Barnaly at (727) 743-8040 (Name of Person) (Area Code & Daytime Telephone Number) | 80 80 |
| Enclosed is a check for the following amount: | |
| \$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & }\times \text{\$155.00 Filing Fee & }\times \text{\$160.00 Filing Fee & }\times \text{\$160.00 Filing Fee & }\text{\$160.00 Filing Fee & }\$160 | <u> </u> |
| Mailing Address Registration Section (additional copy is encoded by the control of the control | AMID: 19 |

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

ARTICLE I - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| The name of the Limited Liability Company is: | : | | | |
|--|------------------------------------|------------------|--|--|
| (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: | | | | |
| | | | | |
| 12815 Pinetorest Wazw. Largo, FL 33773 | 12815 Pinetorest Lamo, FL 33773 | Maxw | | |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) | | | | |
| The name and the Florida street address of the | | | | |
| Maria Barna Name | | 08 DEC SECHET | | |
| 12915 Pincfored | dress (P.O. Box NOT acceptable) | THEED NARY O | | |
| Largo City, State, | FL 33773 | AH IQ: 1 | | |

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

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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 "MGPM" = Managing Member | Name and Address: |
|--|---|
| "MGRM" = Managing Member M Co R Co | Maria Barnaly 12915 Pinetbrest wagw. Larso, FL 33773 |
| | |
| | OB DEC 15 F |
| (Use attachment if necessary) | OF STATE |
| TICLE V: Effective date, if other than the d n effective date is listed, the date must be | ate of filing: January 1, 2009 (OPTIONAL) specific and cannot be more than five business days prior |

ART (If a 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.)

Maria Barnak 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)