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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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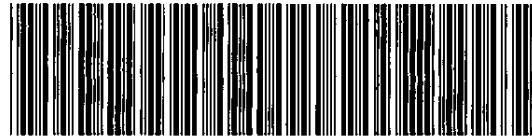
(Business Entity Name)

(Document Number)

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10 AUG -9 PM 2:44
SECRETARY OF STATE
DIVISION OF CORPORATIONS

B. Tolson AUG 10 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: All Around Boat Detailing L.L.C.
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:

Dawn Moore
Name of Person

All Around Boat Detailing L.L.C.
Firm/Company

P.O. Box 2152
Address

Stuart, FL 34995
City/State and Zip Code

all around boat detailing @ live.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dawn Moore at (772) 209-1201
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$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

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

All Around Boat Detailing 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

Principal Office Address:

2180 N.E. Rustic Way
Jensen Beach, FL
34957

Mailing Address:

P.O. Box 2752
Stuart, FL
34995

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:

Dawn Moore
Name

2180 N.E. Rustic Way
Florida street address (P.O. Box **NOT** acceptable)

Jensen Beach FL 34957
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..

Dawn Moore
Registered Agent's Signature (REQUIRED)

(CONTINUED)

10 AUG - 9 PM 2:10
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

Dawn Moore
2180 N.E Rustic Way
Jensen Beach, FL 34957

MGRM

Michelle Moore
3726 St. Benedicts Rd
Fort Pierce, FL 34982

MGRM

Joshua Taylor
P.O. Box 13087
Fort Pierce, FL 34979

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (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:

Dawn Moore

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.)

Dawn Moore

Typed or printed name of signer

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)