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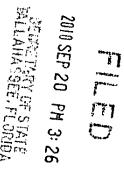
(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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J. SAULSBERRY EXAMINER SEP 2 1 2010

COVER LETTER

TO:	Registration Division of C			
SUBJ	ECT: PANEF	ULLY CLEAN LLC Name of Limi	ted Liability Company	
			···· -···· y···· p···· y	
The e	nclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please	e return all corres	pondence concerning this mat	tter to the following:	
	JOSEPH P H	ATCHER		
			Name of Person	
			Firm/Company	
	5251 CR 209	SOUTH		
			Address	
				20 FAL
	GREEN COV	E SPRINGS, FL 32043		- S - S
	ERIK@WEHI	NERFINANCIAL.COM	ty/State and Zip Code	2010 SEP 20
			for future annual report notification)	IT C
For fu	rther information	concerning this matter, pleas	e call:	PM 3:
JOSI	EPH HATCHE	R	at (904) 735-1592	26.
		of Person	Area Code & Daytime Telephon	ne Number
Enclo	sed is a check f	or the following amount:		
□\$125	5.00 Filing Fee	■\$130.00 Filing Fee & Certificate of Status	Certified Copy C (additional copy is enclosed)	60.00 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 Circl Tallahassee, FL 32301	le

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICLE L. Mama	
	•.
The name of the Limited Liability Compai	ny is:
PANEFULLY CLEAN LLC	(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") LE II - Address: ing address and street address of the principal office of the Limited Liability Company is: d Office Address: Mailing Address: SAME DVE SPRINGS, FL 32043 LE III - Registered Agent, Registered Office, & Registered Agent's Signature: d Liability Company cannot serve as its own Registered Agent. You must designate an individual or another
(Must end with the words "Limited	I Liability Company, "L.L.C.," or "LLC.")
ţ	
ARTICLE II - Address:	
The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5251 CR 209 SOUTH	SAME
GREEN COVE SPRINGS, FL 32043	
ARTICLE III - Registered Agent, Regis	tered Office. & Registered Agent's Signature:
business entity with an active Florida registration.)	
The name and the Floride street address of	f the magistered agent area
the name and the Fiorida street address of	the registered agent are.
ERIK J WEHNER EA	

Name

515 COLLEGE DR

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

MIDDLEBURG

FL 32068

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)
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:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Mem	ıber	
MGRM	JOSÉPH P HATCHER	
	5251 CR 209 SOUTH	
	GREEN COVE SPRINGS, FL 32043	
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		s F
		Jime
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	<u></u>	
(Use attachment if necessary	y)	
LF V: Effective date if other	r than the date of filing: (OPTIONA	AT Y
	te must be specific and cannot be more than five business day	
days after the date of filing.		, o p. 101
•	,	
REQUIRED SIGNATURE	₫:	
0	- MA	

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.)

JOSEPH P HATCHER

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)