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EFFECTIVE DATE 02-07-11

SECREMENT OF STATE

B. BOSTICK

FEB - 3 2011

EXAMINER

COVER LETTER

TO:

TO: Registration S Division of Co			
SUBJECT: Heave	enly Car Detailing	LLC	
		ed Liability Company	_
The enclosed Articles of	Organization and fee(s) are s	submitted for filing.	
Please return all correspondent	ondence concerning this matte	er to the following:	
Larry E. F	Richardson	N. CD	
		Name of Person	
Heavenly	Car Detailing LL		
		Firm/Company	
1534 SE	12th Ave		
		Address	
Gainesville	, FL 32641	TAL	¥ =
1		//State and Zip Code	E .
longkathy@	bellsouth.net E-mail address: (to be used for	or future annual report notification)	
For further information	concerning this matter, please		
Larry E. Richards	son	352 278-3215	AN II: 22
Name o	of Person	Area Code & Daytime Telephone Number	<u>⊅</u>
Enclosed is a check for	r the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Certified Copy (additional copy is enclosed) Certified Copy (additional copy	Status & y
	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

Heavenly Ca	r Detailing LL	C	
		d Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Add The mailing address		the principal office of the Limited Lie	ability Company is:
Principal Office Ad	dress:	Mailing Address:	
1534 SE 12th Ave Gainesville, FL 32641		1534 SE 12th Ave Gainesville, FL 32641	
Garlesville, 1 L 3204		California, 12 02011	
(The Limited Liability Combusiness entity with an act	npany cannot serve as its own live Florida registration.)	stered Office, & Registered Agent's in Registered Agent. You must designate an indivi	
(The Limited Liability Combusiness entity with an act The name and the Flo	npany cannot serve as its own live Florida registration.)	n Registered Agent. You must designate an indivi	idual or another
(The Limited Liability Combusiness entity with an act The name and the Flo	pany cannot serve as its own tive Florida registration.) orida street address o	n Registered Agent. You must designate an indiving the registered agent are: Richardson Name	idual or another 11 FEB -2 FALLAHASS
(The Limited Liability Combusiness entity with an act The name and the Flo	pany cannot serve as its own tive Florida registration.) orida street address of Beatrice K. Long-F	n Registered Agent. You must designate an indiving the registered agent are: Richardson Name	idual or another 11 FEB -2 FALLAHASSE
(The Limited Liability Combusiness entity with an act The name and the Florida Liability Combusiness entity with an act The name and the Florida Liability Combusiness entity with an act	pany cannot serve as its own tive Florida registration.) orida street address of Beatrice K. Long-F	n Registered Agent. You must designate an indiving the registered agent are: Richardson Name AVE	idual or another 11 FEB -2 FALLAHASSE
(The Limited Liability Combusiness entity with an act The name and the Florida Liability Combusiness entity with an act The name and the Florida Liability Combusiness entity with an act	apany cannot serve as its own tive Florida registration.) orida street address of Beatrice K. Long-Florida street Sala SE 12th Florida street Sainesville,	f the registered agent are: Richardson Name AVE reet address (P.O. Box NOT acceptable)	idual or another 11 FEB - 2 AF FALLAHASSEE

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(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:

MGR	Beatrice K. Long-Richardson 1534 SE 12th Ave	-
	Gainesville, FL 32641	_
MGRM	Larry E. Richardson	_
	1534 SE 12th Ave	_
	Gainesville, FL 32641	_
(Use attachment if necessary)	TALLAHASSEE.	11 FEB -2 AM
(Ose attachment if necessary)	FLO	; =
CLEV. Effective data if other than th	e date of filing: <u>7cb. 7, 2011</u> . (OP)	FRANC

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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)