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To:

Division of Corporations

Fax Number : (850) 517-6383

2-23-12

From:

Account Name : DENNIS IGLAY Account Number : I20070000077 Phone : (386) 761-2360 Fax Number : (321)445-4725

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

mail Address: JUSTTINA 1025@ YAHOO, COM

### FLORIDA LIMITED LIABILITY CO.

A Plus Pressure Cleaning, Landscaping, & Critter CATCHER LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

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## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: A Plus Pressure Cleaning, Landscaping, & Critter Catcher 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:

Christino T Aitchison Namc of Person
APIUS Pressure Cleaning, Landscaping, & Critter Catcherll
4 Squash Blossom Trail
Palm Coast, FL 32164 City/State and Zip Code
E-mail address: (To be beed for future annual report notification)
For further information concerning this matter, please call:
Christma TA Hehison at (386) 566-8475  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee,  Certificate of Status Certified Copy  (additional copy is enclosed)  \$160.00 Filing Fee,  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

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

# A Plus Pressure Cleaning, Landscaping, & Critter Catcher LLC

(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:

Principal Office Address:	Mailing Address:
7.5 quash Blasson Teal PAIM COAST, FL 32444	7 Squash Blasson TEL Palm Coast, FL 32164

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:

Christina T. Aitchison
4 Squash Blossom TRAIL Florida street address (P.O. Box NOT acceptable)
Palm Con 3t, FL 32164  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)

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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:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Christina T Atchison + Squash Alassom Trail Palso (2027, FL 33164
MGRM	Dauglas W Astronson 4 Squash Blasson Teau Palm Coast, FL 32/64

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 2-23-2012. (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:**

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 penaltics 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 follows as provided for in s.817.155, F.S.)

Christina T Aitelison
Typed or printed name of signice

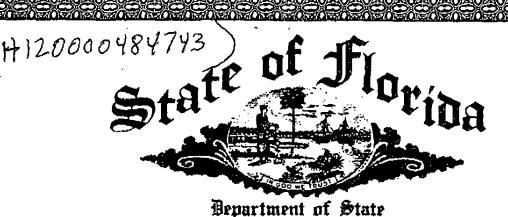
Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- 5 5.00 Certificate of Status (Optional)

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I certify that the attached is a true and correct copy of the Application For Registration of Fictitious Name of A PLUS PRESSURE CLEANING, LANDSCAPING & CRITTER CATCHER, registered with the Department of State on November 20, 2008, as shown by the records of this office.

The Registration Number of this Fictitious Name is G08325900008.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twentieth day of November, 2008

CR2EO22 (01-07)

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Kurt S. Krowning Secretary of State