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SECRETARY OF STATE.
TALLAHASSEE, FLORIDA

K. SALY EXAMINER APR 2 9 2013

COVER LETTER

TO: Registration Section Division of Corporations	·
SUBJECT: SUDSY SOLUTION Name of Limit	DS, L.L.C. ted Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this mat	eter to the following:
CHARL	SIE SPIEGEL
	Name of Person
SUDSY	SOLUTIONS, L.L.C.
	Firm/Company
541 7	HLANE S.W.
	Address
	BEACH, FL. 32962
on ordere	ty/State and Zip Code
E-mail address: (to be used	for future arrhual report potification)
For further information concerning this matter, pleas	e call:
CHARUSIE SPIEGEL Name of Person	at (772) 360-2034 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
1\$125.00 Filing Fee & Certificate of Status	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	Street/Courier Address Registration Section Division of Corporations

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:

ARTICLE II - Address:

Principal Office Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

		_	
541	TELLA	NE S.	W.

business entity with an active Florida registration.)

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

The name and the Florida street address of the registered agent are:

CHARLSIE SPIEGEL

Name

541 7th LANE S.W.

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

VEYD BEACH, FL 32942

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 of 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:

MGIR CHAPLSIE SPIEGEL 541 7th LANE S.W. VERO BEACH, FL 329UC	
(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 busines prior to or 90 days after the date of filing.)	-
REQUIRED SIGNATURE: Signature of a member of 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.) CHAPLSIE SPIEGE 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)