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DIVISION OF CORPORATION

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## **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT: Prec	ision Painti Name of Limit	ng and Cleanir	ng Service
The enclosed Articles of	f Organization and fee(s) are s	submitted for filing.	
Please return all corresp	ondence concerning this matt	er to the following:	
Larry	x Brandon	Harrell	
	•	Name of Person	
		Firm/Company	
	<u>651 South</u>	1 Street	
	<b>A</b>	CV FL 3235	'
	Cit	y/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	E-mail address: (to be used t	or future annual report notification)	·
For further information	concerning this matter, please	call:	
Larry	Harrell	at (850) 345 - Area Code & Daytime Telep	9702 hone Number
	or the following amount:		
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & <b>Y</b> 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 C	

Tallahassee, FL 32301

## · ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Precision kinting & Cleaning  (Must end with the words "Limited Liability Company, "L.L.C.," of "	Service L.L.C
ARTICLE II - Address: The mailing address and street address of the principal office of the I	Limited Liability Company is:
Principal Office Address: 651 South Street 651 South  Quincy, F1 32351	b street
ARTICLE III - Registered Agent, Registered Office, & Registered (The Limited Liability Company cannot serve as its own Registered Agent. You must desig business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:  Larry Harrell  Name  Florida street address (P.O. Box NOT acc  Ouncy FL 32351  City, State, and Zip	SECONDAY OF STATE PALLANASSEE PLOPINA PROPERTY OF STATE PROPINA
Having been named as registered agent and to accept service of procliability company at the place designated in this certificate, I herebregistered agent and agree to act in this capacity. I further agree to all statutes relating to the proper and complete performance of my and accept the obligations of my position as registered agent as proceedings.	by accept the appointment as comply with the provisions of duties, and I am familiar with

Page 1 of 2

(CONTINUED)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:  Larry Harrell  And C H 9th
MGRM	& 651 South Street
:	Quincy, Fl 32351
	77
(Use attachment if necessary)	
CLE V: Effective date, if other than the	e date of filing: (OPTIONAL)
to or 90 days after the date of filing.)	st be specific and cannot be more than five business
REQUIRED SIGNATURE:	, 4 , , , , , , , , , , , , , , , , , ,
7)	

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)

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constitutes a third degree felony as provided for in §.817.155, F.S.)

(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 Department of State.

Typed or printed name of signee