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ALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

GOLDEN LAUNDRY, 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:

DONIA A. ROBERTS

Name of Person

DONIA A. ROBERTS, P.A.

Firm/Company

257 SE DR. MLK JR. BLVD.

Address

BELLE GLADE, FLORIDA 33430

City/State and Zip Code

ATTORNEY@DONIAROBERTSPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ATEF ALI

...561

985-0444

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□\$125.00 Filing Fee

■\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & 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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	s:
GOLDEN LAUNDRY, LLC (Must end with the words "Limited Lia	bility Company, "L.L.C.," or "Ll.C.")
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
300 SOUTH MAIN STREET	300 SOUTH MAIN STREET
BELLE GLADE, FLORIDA 33430	BELLE GLADE, FLORIDA 33430
(The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.) The name and the Florida street address of the	
Nan	
300 SOUTH MAIN STREET	address (P.O. Box NOT acceptable)
Florida street a	address (P.O. Box NOT acceptable)
BELLE GLADE	FL 33430
•	address (P.O. Box NOT acceptable) FL 33430 State, and Zip o accept service of process for the above stated limited
liability company at the place designated in registered agent and agree to act in this capa all statutes relating to the proper and compi	n this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of lete performance of my duties, and I am familiar with 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:

MGRM		ATEF ALI 300 SOUTH MAIN STREET
		BELLE GLADE, FL. 33430
MGRM		AKIF ALI
	18017 GANTRY DRIVE	
	PFLUGERVILLE, TX. 78660	
(Use attachment	if necessary)	
I E V. Effective	data if athan than t	he data of filings
ffective date is l	uaic, ii omer man u listed the date mu	he date of filing: (OPTIONAL st be specific and cannot be more than five busine
	the date of filing.)	
,,		

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)