Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : CLARA GIRALDO, P.A.

Account Number : I19990000017

Fax Number

: (305)485-9300 : (305)485-1098

**Enter the email address for this business entity to be used for future;

annual report mailings. Enter only one email address please.** *i*1 ∈ :: Email Address: FLORIDA LIMITED LIABILITY CO. 1,2,3 CLEAN MY PLACE,LLC. Certificate of Status Certified Copy Page Count

Estimated Charge

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\$130.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

1,2,3 CLEAN MY PLACE, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

1,2,3 CLEAN MY PLACE, LLC.

ARTICLE II - ADDRESS

The principal office of the Limited Liability Company is:

8960 NW 97 AVE # 215 DORAL, FL 33178 SECRETARY OF STATE
FALL AHASSEE, FLOSING

The mailing address shall be:

8960 NW 97 AVE # 215 DORAL, FL 33178

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

ENDER L. SOTO
8960 NW 97 AVE # 215
Florida street address (P.O.BOX NOT acceptable)
DORAL, FL 33178
City, State, and Zip

4160001984083

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 605, F.S..

REGISTERED AGENT'S SIGNATURE

3054851098

ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

ENDER L. SOTO 8960 NW 97 AVE # 215 DORAL, FL 33178 MANAGER

ALFREDO A. MONTILLA 8960 NW 97 AVE # 215 DORAL, FL 33178 MANAGER

AUG II AM 8:

Signature of a member or an authorized representative of a member.

(An additional article must be added if an effective date is requested)

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ENDER L. SOTO

Typed or printed name of signee