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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Business Link) Harris,
(Document Number)
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: WheelHouse Cleaning 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:
Valerie J. Colson Name of Person
Firm/Company
1435 Kingfind AVE Address
Tallahassee, Fla. 32310 City/State and Zip Code V J Colson 1776 @ Gmial. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Valence Colson at (850) 559-6908 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee & \$155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "Limited Liability Company L'L.L.C.,

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

ARTICLE 1 - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

1011ah 05584 Hai 38310
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:
Valetie J. Colson
1435 Kyugfusd We Florida street address (P.O. Box NOT acceptable)
Tallahassre Pla. 32810 City State 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

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Title: "AMBR" = Author "MGR" = Manag	
"AMBR"	Dhadiah Rhodes 1400 Kingdard Ave Tallahasser Flo. 32310
(Use attachment i	••
CLE V: Effective date is liste te of filing.) If the date inserted	e, if other than the date of filing:
CLE V: Effective date is listente of filing.) If the date inserted ecument's effective of	e, if other than the date of filing:
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CLE V: Effective date effective date is listed to of filing.) If the date inserted becoment's effective of CLE VI: Other proving REOUIRED SIGNATURE.	e, if other than the date of filing:

Page 2 of 2