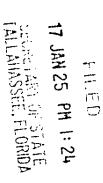
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M. 1/25/10

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Hollingworth Cleaning Company 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:
Theresa Hollinsworth Name of Person
Hallinsworth Cleaning Company LLC. Firm/Company
4448 Trails End Address
Middleborg Fl. 32068 City/State and Zip Code Panhanche transport@gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times S130.00 Filing Fee \$\times S155.00 Filing Fee \$\times S155.00 Filing Fee \$\times S160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$\times S160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Adduses Charles Adduses

Mailing Address

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

Street Address

New Filing 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:

(Must end with the words "Limited Liability - Address: ddress and street address of the principal office of the	
Principal Office Address:	Mailing Address:
Hyys Trails End Middleburg Fl. 32068	Middleburg Fr. 32068

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..

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

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

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(Use attachment if necessary) (OPTIONAL) (OPTIONAL)	"AMBR" = Authorized Member	
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