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## COVER LETTER ...

TO: New Filing Section Division of Corporations
SUBJECT: David Wentherspoon Cleaning Service 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:
David Weatherspoon
Name of Person  David Weatherspoon Cleaning Service Firm/Company
2401 Ramblewood At. (B) Address
City/State and Zip Code  City/State and Zip Code  City/State and Zip Code  City/State and Zip Code  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
David Weatherspain at (850) 567-3378  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  \$125.00 Filing Fee & S130.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address New Filing Section Division of Corporations Division of Corporations Clifton Building Tallahassee, FL 32314  Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

David Weatherspoon Cleaning Service Luc.

(Must contain the words "Lindited Liability Company, "L.L.C or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Talla Lussee, FL. 37303

2401 Ramblewood Ct Tallahassee, FL 32303

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:

Name

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

Tallahassee FL. 32303

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 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 (REQUIRED)

(CONTINUED)

Title:	authorized to manage and control the Limited Liability Company:  Name and Address:
"AMBR" = Authorized Member "MGR" = Manager  MGR	Charlise Weatherspoon 2101 Ramblewood Ct. 303
	Tallahassee, FL. 32303
(Use attachment if necessary)	1011717817 (OPTIONAL)
If an effective date is listed, the date must be be date of filing)	late of filing: OZZOZO. (OPTIONAL) specific and cannot be more than five business days prior to or 90 days after of meet the applicable statutory filing requirements, this date will not be listed as ent of State's records.
ARTICLE VI: Other provisions, if any.	
REOUIRED SIGNATURA:	member or an authorized representative of a member.
This document is ex I am aware that any constitutes a third de	ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
Charl	Typed or printed name of Agnee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)