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COVER LETTER

| TO: New Filing Section Division of Corporations |
|---|
| SUBJECT: Xtreme Pressure Washing 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: |
| Robert A. Roy Name of Person |
| Firm/Company |
| 8080 Castle Pointe Way |
| Pensacola, FL 32506 City/State and Zip Code |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Robert A. Roy at (850), 384 - 3978 Name of Person Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: \$125.00 Filing Fee \$ Certificate of Status \$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & 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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



October 19, 2018

ROBERT A ROY 8080 CASTLE POINTE WAY PENSACOLA, FL 32506

SUBJECT: XTREME PRESSURE WASHING LLC

Ref. Number: W1800<u>009098</u>8

We have received your document for XTREME PRESSURE WASHING LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Most financial institutions require the name(s) and address(es) of persons authorized to manage the limited liability company be listed on our records in order for the business entity to open a bank account. Youmay wish to revise your document to include the name, address, and titleof such persons. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

Letter Number: 918A00021437

Division of the property of th

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: |
|---|
| The name of the Limited Liability Company is: |
| (Must contain the words "Limited Liability Company, "L.L.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: |
| 8080 Castle Pointe way 8080 Castle Pointe way Pensacola, FL 32506 Pensacola, FL 32506 |
| 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: Rabert A. Roy |
| (CONTINUED) |

| Title: "AMBR" = Authorize | ed Member | Name and Address: | |
|------------------------------|--|--|-------------|
| "MGR" = Manager | | Robert A. Rox 8080 Castle Pointe way Pensagola, FL 325010 | |
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| (Use attachment if ne | ecessary) | | |
| the date of filing.) | his block does not meet th on the Department of Stat | and cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed the state of the stat | |
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| Th.: | | or an authorized representative of a member. | |
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| I am const | aware that any false infor- titutes a third degree felon Robert Typ | rmation submitted in a document to the Department (\$\frac{\partial}{2}\) my as provided for in s.817.155, F.S. | ロニーコ |

The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-