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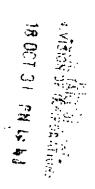
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## **COVER LETTER**

	Sew Filing Section Division of Corporations	/	
SUBJEC	Sparkleberry Cleaning LLC		
SUBJEC	Name of I	Limited Liability Company	
The enclo	sed Articles of Organization and fee(s)	are submitted for filing.	
Please ret	urn all correspondence concerning this	matter to the following:	
	Danielle N. Dallaportas		
		Name of Person	
	Sparkleberry Cleaning LLC		
		Firm/Company	_
	2233 Bracknell Forest Trail		
	Address		
	Tavares F1. 32778		
	ddcleaning@gmail.com	City/State and Zip Code	
	E-mail address: (to be us	ed for future annual report notification)	–ဍ သ လ
For further	information concerning this matter, ple	ase call:	
	Gary Henriksenat (	352 350-1733	GCL 31 MA P. 2.150
	Name of Person	Area Code Daytime Telephone Number	- S
Enclosed	s a check for the following amount:		
\$125.00	iling Fee S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee. Certified Copy (additional copy is enclosed) Certified Copy (additional copy is encl	
	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

Sparkleberry Clea	nning LLC		
(Must c	ontain the words "Limited	d Liability Company.	"L.L.C" or "LLC.")
ARTICLE II - Address:			
The mailing address and stree	et address of the principal	office of the Limited	Liability Company is:
<u>Prin</u> e	cipal Office Address:		Mailing Address:
2233 Bracknell Fo	2233 Bracknell Forest Trail		e
Tavares FL 32778	8		
ARTICLE III - Registered a			
	any cannot serve as its ow an active Florida registrat	on Registered Agent. 'ion.)	
The Limited Liability Companion ther business entity with a	any cannot serve as its ow an active Florida registrat	vn Registered Agent. \ ion.) ed agent are:	it's Signature: You must designate an individual (
The Limited Liability Companion ther business entity with a	any cannot serve as its ow an active Florida registrat eet address of the register	vn Registered Agent. \ ion.) ed agent are:	
The Limited Liability Companion ther business entity with a	any cannot serve as its ow an active Florida registrat eet address of the register	vn Registered Agent. Viton.)  ed agent are:  ortas  Name	
The Limited Liability Companion ther business entity with a	any cannot serve as its ow an active Florida registrat eet address of the register Danielle N. Dallap	vn Registered Agent. Viton.)  ed agent are:  ortas  Name	You must designate an individual
The Limited Liability Companion ther business entity with a	any cannot serve as its ow an active Florida registrat eet address of the register Danielle N. Dallap	vn Registered Agent. Vion.)  ed agent are:  ortas  Name  rest Trail	You must designate an individual

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..

(CONTINUED)

egistered Agent's Signature (REQUIRED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized	Name and Address:
"MGR" = Manager	hember
MGR	Danielle N. Dallaportas
-	2233 Bracknell Forest Trail
	Tavares FL 32778
AMBR	Matthew Dallaportas
	2233 Bracknell Forest Trail
	Tavares FL 32778
	N/A
	<u>N/A</u>
	N/A
	<u>N/A</u>
(Use attachment if nec	sarv)
an effective date is listed, the date of filing.) ote: If the date inserted in thi	ner than the date of filing: September 1, 2018 (OPTIONAL)  late must be specific and cannot be more than five business days prior to or 90 days after block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
RTICLE VI: Other provisions one	any.
REQUIRED SIGNAT	Puille Dolle
	nature of a member or an authorized representative of a member.
	ument is executed in accordance with section 605.0203 (1) (b). Florida Statutes.
Lam a	re that any false information submitted in a document to the Department of State
constit	es a third degree felony as provided for in s.817,155, F.S.

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

Danielle N. Dallaportas

\$ 5.00 Certificate of Status (Optional)

## U80000272375

To: Florida Secretary of State, Corporations Division From: Danielle Dallaportas, Sparkleberry Cleaning, Inc.

To: Fax No. 850-245-6804

Attn: Carlos

Subject: Release of corporate name - Document No. P16000081590

Dear Carlos.

Please be advised that I am the former President and sole owner of Sparkleberry Cleaning, Inc. above, and the current owner of Sparkleberry Cleaning, LLC. (W18000096430)

The purpose of this fax is to advise you that Sparkleberry Cleaning, Inc and Sparkleberry Cleaning, LLC are owned by the same person, myself.

A corporate dissolution was filed for Sparkleberry Cleaning, Inc. with the IRS and Florida Secretary of State months ago and even though the two entities are named the same, I do not intend to reinstate Sparkleberry Cleaning, Inc. ever again.

Therefore, I am now requesting that the original documents filed for Sparkleberry Cleaning, LLC be considered valid and the wording "Rejected Filing" be removed from this entity on the SunBiz website.

Thank you.

Respectfully,

Danielle Dallaportas
Operating Member

Sparkleberry Cleaning, LLC