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(Re	questor's Name)	
(Ado	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone #	<i>y</i>)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	<u> </u>
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

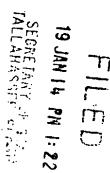
Office Use Only

M. MOON JAN 1 8 1010



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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Highway 22 Carwash and defailing Playaround Rental S 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:
Methina Wright Name of Person
Highway 22 mush and detailing / Flyand Runtak
1523 Highway 22 LX Address
City/State and Zip Code B. Keitriauright O Yalwo. Com E-mail address: (to b) used for Juture 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:
S125.00 Filing Fee S130.00 Filing Fee S155.00 Filing Fee S160.00 Filing Fee, Certificate of Status (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status Statu
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Highway 22 Canvals and defailing Playarand Ronfels LC (Myst contain the words "Limited Liability Company," "L.L.O.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
1523 highway 22	1523 Highway 22
wewahilchild fl	wayohi-chila 4-1
32465	324LS
	

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 J Name J 1523 highway 22 Florida street address (P.O. Box NOT acceptable)

Www.hirhva Fl 32465
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 Synature (REQUIRED)

(CONTINUED)



itle:	Name and Address:
AMBR" = Authorized Member MGR" = Manager	11 1 1 1 1 0 10 5
HMBR	profing Mody HMBS
	(cleva P1 52465
MCR	Terrell Jackson
	The extre emer crafe
	(11000 F1 32418
V: Effective date, if other than the content of the	e date of filing:
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