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19 JUN 10 AM II: SLUME FAR OF STA FALLAHASSEE, FLOR STARE TARY OF CORPORATION

COVER LETTER

TO:	New Filing Section Division of Corporations		
CHB IEA	B&F Cleaning Solutions LLC		
SUBJEC		of Limited Liability Company	
The encl	losed Articles of Organization and fe	e(s) are submitted for filing.	
Please re	eturn all correspondence concerning t	his matter to the following:	
	Darshion Bacon		
		Name of Person	
	B&F Cleaning Solutions LLC		
		Firm/Company	
	P. O. Box 4763		
		Address	
	Ocala, FL 34478		
		City/State and Zip Code	
	dbacon4@outlook.com		
	E-mail address: (to b	e used for future annual report notification)	
For furthe	er information concerning this matter,	please call:	
	Darshion Bacon	352 239-8386 at ()	
	Name of Person	Area Code Daytime Telephone Number	
Casloon	d is a globale for the following amount		
	d is a check for the following amount Filing Fee S130.00 Filing Fe Certificate of State	e & \$155.00 Filing Fee & \$160.00 Filing Fe	us &
	Mailing Address New Filing Section Division of Corporations	Street Address New Filing Section Division of Corporations	
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

B&F Cl	eaning Solutions LLC. (Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
TCLE II - Ade		
mailing address	s and street address of the principal office	of the Limited Liability Company is:
	Principal Office Address:	Mailing Address:
		n o n 1872
1934 NV	W 1st St.	P. O. Box 4763

The name and the Florida street address of the registered agent are:

Name

Name

1934 NW 15+

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

Ocala FL 3949 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)

JIVISIUN OF CORPORATIONS

19 JUN 10 AM 11: 35
JEUNE LAND OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:			
	ithorized Member		
"MGR" = Mar	ıager	Darshion Bacon	
MGR		P. O. Box 4763	-
		Ocala, Fl. 34478	
		Ocana, 1 g y v 170	
MGR		Henry Fraizer	
		1934 NW 1st St	
		Ocala, FL 34474	
			
			<u>.</u>
(Use attachme	nt if necessary)		
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