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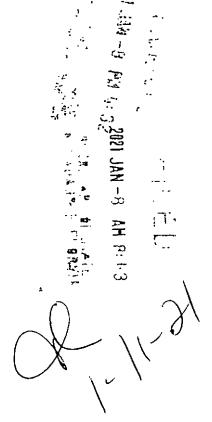
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COVER LETTER

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SUBJECT	WET LOO	K MOBILE DETAIL	ING, L	LC				
SOBJECT		Name o	f Limite	ed Liabili	ty Company			
The enclose	ed Articles of	Organization and fee(s) are s	ubmitted	for filing.			
Please retui	n all correspo	ondence concerning th	is matte	er to the fo	ollowing:			
	LORENZO A	ALLEN						
		·•-		Name of	Person			_
	WET LOOK	MOBILE DETAILI	٧G, LL	С				
				Firm/Cor	npany			_
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_		:-mail address: (to be		r future a	nnual report notificati	ou) ·	10	દે- કે-
For further in	nformation co	ncerning this matter, p	olease c	all:		•	<i>.</i> ;	w
	LORENZO /		305		600-8534			
	Nam	e of Person		a Code	Daytime Telephone	e Number		
Enclosed is	a check for t	he following amount:						
□\$125.00		■\$130.00 Filing F Certificate of Statu	S	Certific	i.00 Filing Fee & ed Copy ed Copy is enclosed)	☐\$160.00 Certificate Certified Co (additional co	of Status opy	&
	New F Division P.O. B	ng Address illing Section on of Corporations lox 6327 assee, FL 32314			Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	issee et, Suite 810		

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WET LOOK MOBILE DETAILING, LLC

(Must contain the words "Limited 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:

286 SW 1ST TERRACE DEERFIELD BEACH, FL 33441 Mailing Address:

286-SW IST TERRACE DEERFIELD BEACH, FL 33441

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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:

LORENZO ALLEN

 N_{ame}

286 SW 1ST TERRACE

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

DEERFIELD BEACH

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 taking been named as registered agent and to accept service of process for the above stated timited natural company at the first agent and agree to act in this capacity. [

I taking been named as registered agent and agree to act in this capacity. [

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I taking been named as registered agent and agree to act in this capacity. [

I taking been named as registered agent and agent a place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I am Ganillan with and accept the obligations of all statutes relating to the proper and complete performance of my duties, and I Jumer agree to comply with the provisions of an statutes relating to the proper and complete performance of my position as registered agent as provided for in Chapter 605, F.S.

(CONTINUED)

ARTICLE IV-

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

\$ 5.00 Certificate of Status (Optional)		
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:	"MGR" = Manager	
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:		LODENZO ALLEN
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:	AMDR	286 SW IST TERRACE
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:		DEERFIELD BEACH, FL 33441
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:		
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CLE V: Effective date, if other than the date of filing:	(Use attachment if necessary)	
REOUIRED SIGNATURE: Signature of a member of an authorized representative of a member. This document is essented in date any false information submitted in a document to the Department of State are followed for in s.817.155, F.S. LORENZO ALLEN Signature of Organization and Designation of Registered Agent \$ 30.00 Certificate of Status (Optional) \$ 5.00 Certificate of Status (Optional)		
REOURED SIGNATURE: Signature of a member of an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. LORENZO ALLEN Typed or printed name of signee Filling Fees: \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)	CLE VI: Other provisions, if any.	
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