## L21000088304

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:
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SECRETARY OF STATE
IALLAHASSEE, FLORIDA

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## **COVER LETTER**

	ew Filing Section ivision of Corporations		
eub ieza	Southern Power House Pressure	Washing LLC	
SUBJECT		f Limited Liabil	ity Company
The enclos	sed Articles of Organization and fee(	s) are submitted	for filing.
Please retu	im all correspondence concerning th	is matter to the t	following:
	Larry Borneisen		
		Name of	Person
		Firm/Co	
		FIRITO	mpany
	4607 Castlewood Road		
		Addr	ess
	Seffner, Florida 33584		
	Coretarey	City/State an	rd Zip Code - O/. Com
	E-mail address: (to be	used for future a	annual report notification)
For further i	information concerning this matter, p	lease call:	
	Larry Borneisen	813	310-4909
	Name of Person	Area Code	Daytime Telephone Number
Enclosed i	s a check for the following amount:		
□\$125.00	Filing Fee \B\$130:00 Filing Fe Ceptificate of Statu	s Certifi	5.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address
	New Filing Section Division of Corporations		New Filing Section Division The Centre of Tallahassee
	P.O. Box 6327		2415 N. Monroe Street, Suite 810
	Tallahassee, FL 32314		Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Southern Power House Pressure Washing LLC	
(Must contain the words "Limited Liability Com	npany, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the principal office of the L  Principal Office Address:	
The mailing address and street address of the principal office of the L	imited Liability Company is:  Mailing Address:

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:

Larry Borneisen		
	Name	
4607 Castlewood R	oad	
Florida street addre	ess (P.O. Box <u>NOT</u> acc	eptable)
Setfiner	Florida	33584
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..

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## ARTICLE IV-

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

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Larry Borneisen 4607 Castlewood Road Seffner, Fla 33584
AMBR	Josh Gransky 4607 Castlewood Road Seffner Fla .33584
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(Use attachment if necessary)	61.44
TICLE V: Effective date, if other than the date in effective date is listed, the date must be state of filing.)  te: If the date inserted in this block does not	specific and cannot be more than five business days prior to or 90 days a t meet the applicable statutory filing requirements, this date will not be list
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