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Division of Corporations

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Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

JOSHPETERSONFF@GMAIL.COM

FLORIDA LIMITED LIABILITY CO.

Supreme Softwash Roof Cleaning LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: Supreme Softwash Roof Cleaning LLC (Must end with 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: Principal Office Address: Mailing Address: 185 175th Ter Dr E, Apt E Redington Shores, FL 33708 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:

| Joshua Peterson | |
|---------------------------------|--------------------|
| Nan | ne |
| 185 175th Ter Dr E, Ap | t E |
| Florida street address (P.O. Bo | ox NOT acceptable) |
| Redington Shores | FL 33708 |
| City | 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

Registered Agent's Signature (REQUIRED)

Joshua Peterson

(CONTINUED)

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| <u>Fitle:</u> | Name and Address: |
|--|--|
| 'AMBR" = Authorized Member | |
| 'MGR" = Manager AMBR | Joshua Peterson |
| | 185 175th Ter Dr E, Apt E |
| | Redington Shores, FL 33708 |
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| EV: Effective date, if other than the ctive date is listed, the date must f filing.) | date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 5 |
| (Use attachment if necessary) E V: Effective date, if other than the ctive date is listed, the date must filing.) E VI: Other provisions, if any. | date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or ! |
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| EV: Effective date, if other than the ctive date is listed, the date must filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with seconstitutes an affirmate I am aware that any factors.) | a member or an authorized representative of a member. |
| E V: Effective date, if other than the ctive date is listed, the date must filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with seconstitutes an affirmate I am aware that any factors.) | a member or an authorized representative of a member. tion 605.0203 (!) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. see information submitted in a document to the Department of State |

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