Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000163268 3)))



H220001632683ABC/

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HUBCO

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.

Email Address:_ LOPEZFRANKY006@GMAIL.COM

MY -5 AM 8: 23

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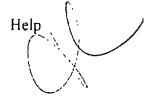
FLORIDA LIMITED LIABILITY CO.

Suncoast Boat Wash LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130,00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Suncoast Boat Wash LLC			
(Must end with the w	vords "Limited Liability Company, "L.L.C.," or "LL	C.")	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Compan	y is:	
Principal Office Address:	Mailing Address:		
14929 Dennis Drive	14929 Dennis Drive		
Hudson, FL 34669	Hudson, FL 34669		
(The Limited Liability Company cannot so	stered Office, & Registered Agent's Signature: erve as its own Registered Agent. You must designat	e an individual or	
(The Limited Liability Company cannot so another business entity with an active Flo	erve as its own Registered Agent. You must designat rida registration.)		
(The Limited Liability Company cannot so	erve as its own Registered Agent. You must designat rida registration.)		
(The Limited Liability Company cannot so another business entity with an active Flo	erve as its own Registered Agent. You must designat rida registration.) f the registered agent are:		
(The Limited Liability Company cannot so another business entity with an active Flo The name and the Florida street address of	erve as its own Registered Agent. You must designat rida registration.) f the registered agent are:	2022 HAY	
(The Limited Liability Company cannot so another business entity with an active Flo The name and the Florida street address of	erve as its own Registered Agent. You must designat rida registration.) If the registered agent are: Lopez Name	2022 MAY -5	
(The Limited Liability Company cannot so another business entity with an active Flo. The name and the Florida street address of Frank Hunter 14929 Dennis	erve as its own Registered Agent. You must designat rida registration.) If the registered agent are: Lopez Name	2022 HAY	
(The Limited Liability Company cannot so another business entity with an active Flo. The name and the Florida street address of Frank Hunter 14929 Dennis	erve as its own Registered Agent. You must designat rida registration.) If the registered agent are: Lopez Name Drive	2022 MAY -5	

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)

Frank Hunter Lopez

(CONTINUED)

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<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager AMBR	Franky Lopez		
	14929 Dennis Drive Hudson, FL 34669		
			
			
(Use attachment if necessary)			
•	of filing:		
effective date is listed, the date must be speate of filing.)	ecific and cannot be more than five business days prior to or 90 d	after	
ICLE VI: Other provisions, if any.	SEL S		
· · · · · · · · · · · · · · · · · · ·	081D 081D	•	
	77	•	
REQUIRED SIGNATURE	and to be		
Signature of a men (In accordance with section of constitutes an affirmation ur I am aware that any false inf	mber or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State clony as provided for in s.817.155, F.S.)		