onic ling Co Sheet

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Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone

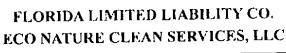
: (305)552-5973

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

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FILE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANALLAHASSE

ARTICLE 1 - Name:

3052201448

ECO NATURE CLEAN SERVICES, LLC

ARTICLE II - Address:

The malling address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

15811 SW 39th Ter

15611 SW 39th Ter

MIAMI, FL 33185

MIAMI, FL 33185

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:

Name

IVONNE PEREZ

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

15611 SW 39th Ter

MIAMI

FL

33185

City

State

Zlp

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 camply 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 provide for in chapter 6)5, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV -

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

Title:

Name and Address:

"AMBR" = Authorized Member

3052201440

"MGR" = Manager

AMBR

IVONNE PEREZ

15611 SW 39th Ter

MIAMI, FL 33185

AMBR

FEUX GUTIERREZ

15611 SW 39th Ter

MIAMI, FL 33185

(Use attachment if necessary)

ARTICLE VI: Other provisions, if any

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0103 (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.