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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL .
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only

B. KOHR

MAR - 3 2009

EXAMINER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

Registration Section

TO:

Division of Corporations
SUBJECT: Clean Green Florida, LLC
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Shawn Thompson
(Name of Person)
Clean Green Florida, LLC
(Firm/Company)
10146 Cedar Dune Dr.
(Address)
Tampa, FL 33624
(City/State and Zip Code)
For further information concerning this matter, please call:
Shawn Thompson _{at (} 813) 960-3085
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee \& \bigcup \\$155.00 Filing Fee \& \bigcup \\$160.00 Filing Fee, Certificate of Status \$\bigcup Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 25, 2009

SHAWN THOMPSON 10146 CEDAR DUNE DRIVE TAMPA, FL 33624

SUBJECT: CLEAN GREEN FLORIDA, LLC

Ref. Number: W09000008541



We have received your document for CLEAN GREEN FLORIDA, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$160.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 309A00006352

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is	x:	
		
CLEANGREENFL, LLC		
(Must end with the words "Limited Liab	ility 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:	
10146 Cedar Dune Dr.	10146 Cedar Dune Dr.	
Tampa, FL 33624	Tampa, FL 33624	
The name and the Florida street address of the Shawn Thompso Name	n Em 9	
	1 全門第一	
10146 Cedar Du	Idress (P.O. Box NOT acceptable)	
Tampa, FL 33624		
City, State,	and Zip	
•	日間の	
<u> </u>	accept service of process for the above stated limited this certificate, I hereby accept the appointment as	
	ty. I further agree to comply with the provisions of all	
	erformance of my duties, and I am familiar with and	
	istered agent as provided for in Chapter 608, F.S	
	د	
Slam	1 Comp &	
Registered Agent's Signa	uture (REQUIRED)	

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	Shawn Thompson 10146 Cedar Dune Dr. Tampa, FL 33624
· · · · · · · · · · · · · · · · · · ·	·
	•
	<u> </u>
Use attachment if necessary) LE V: Effective date, if other fective date is listed, the date days after the date of filing.)	than the date of filing: (OPTION must be specific and cannot be more than five business d

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Shawn Thompson

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)