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(Re	equestor's Name)					
(Ad	Idress)					
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PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Do	ocument Number)	 				
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Certified Copies	_ Certificates o	f Status				
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COVER LETTER

то:		tion Section of Corporations					
SUBJE		bourne Cleaning, I	LLC				
SUDJE	C. I.,	Name of Limited Liability Company					
The enc Existence	losed "Ap	plication by Foreig eck are submitted (ign Limited Liability Company to register the above reference	for Authoriza d foreign limit	tion to Transact Br ted liability compa	usiness in Florida," Cer ny to transact business	tificate of in Florida.
Please r	eturn all c	orrespondence coi	ncerning this matter to the foll	owing:			
		Walker Badham					
			Namo	of Person			
		Melbourne Clean	ning, 1.1.C				
			Firm	Company			
		PO Box 59313					
			٨	ddress			
		Homewood, Al	35259				
			City/State	and Zip Code		- 	
	•	vabadkam@gmail	1.com				
	_		E-mail address: (to be used fo	r future annual	report notification	1)	
For furt	her inforn	nation concerning	this matter, please call:				
	Walker	Badham	,	205 at (253-8135		
		Name of	Contact Person	Area Code	Daytime Te	lephone Number	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FI. 32314				STREET ADDR Division of Corporation Sect Clifton Building 2661 Executive C Tallahassee, FL	orations ion Jenter Circle		
	Enclosed Please n	I is a check for the take check payable	e following amount: e to: FLORIDA DEPARTM	ENT OF STA	TE	_	
	□ \$12:	5.00 Filing Fee	S130.00 Filing Fee & Certificate of Status		Filing Fee & lied Copy	\$160.00 Filing Fee, of Status & Certifie	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN TAMINED HABILITY COMPANY TOTRANSACTER SINESS IN THE STATE OF FLORIDA:

Melbourne Cleaning, L	I.C					
Residential Cleaning of M	LC Limited Liability Company; must include "Limit felbourne, LLC					
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Fl	orida. The alter	nate name must include "Limited Liability Con	npany," "L.E.C." or "LLC."		
Alabama 2.			88-4348801			
(Jurisdiction under the law of which foreign limited liability company is organized)			(FEI number, if applicable)			
1/1/2023						
····	(Date first transacted business in Florida, (Eprior to (See sections 605,0904 & 605,0905, F.S. to determ	registration) time penalty lia	bility)			
306 Clermont Drive						
5. (Street Address of I	rincipal Office)	0	(Mailing Address)	Box 59313 (Mailing Address)		
Homewood, Al. 35209		I	domewood, AL 35259			
				20		
7. Name and street address	s of Florida registered agent: (P.O. Bo	e <u>NOT</u> ac	ceptable)			
Name:	Registered Agents Inc		_	-·· ::		
Office Address:	7901 4TH ST N STE 300			J: 05		
	ST PETERSBURG		33702 , Florida(Zip code)			
(Cny)			(vib code)			

Registered agent's acceptance:

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 application. 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]; Title or Capacity: Name and Address: Title or Capacity: Name and Address: Name: Britt Thames Name: Walker Badham Manager ■ Manager Address: 306 Clermont Drive Address: 96 Crestview Dr Member Member Birmingham, AL 35213 Homewood, AL 35209 ___Authorized Authorized Person Person Other____ Other____ Other____ Other_ Manager Name: Name: Manager Member Address: Member | Address: Authorized Authorized Person Person Other___ Other_____ Other Other Manager Name: Manager Manager Name: Member | Address: Member Address: Authorized Authorized Person Person ___Other_____ \square Other $_$ []Other___ Other___ Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed individuals may be added to the index when filing your Florida Department of State Annual Report form. 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (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. Wester Bellion Signature of an authorized person

Typed or printed name of signee

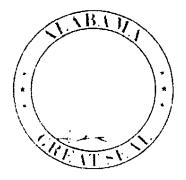
Walker Badham

Wes Allen Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Wes Allen, Secretary of State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the entity records on file in this office disclose that Melbourne Cleaning, LLC was formed in Alabama on December 2, 2022. The Alabama Entity Identification number for this entity is 001-051-602. I further certify that the records do not disclose that said entity has been dissolved, cancelled or terminated.



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In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the city of Montgomery, on this day.

02/16/2023

Date

Wes Allen

Secretary of State