

M24000000878

12/4/20 12:38 AM

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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.

((H24000032781 3)))



H240000327813ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet

To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : BEGGS & LANE  
Account Number : I20020000155  
Phone : (850)432-2451  
Fax Number : (850)469-3331

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

Email Address: slw@beggs-lane.com

2024 JAN 24 PM 4:49  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Foreign Limited Liability Company  
Cleared To Clean, LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

RECEIVED

2024 JAN 24 PM 3:33  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Electronic Filing Menu    Corporate Filing Menu    Help

{{(H24000032781 3)}}

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: CLEARED TO CLEAN, LLC**

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Stephen D. Wilson, Esq.

\_\_\_\_\_  
Name of Person

Beggs & Lane, RLLP

\_\_\_\_\_  
Firm/Company

501 Commendencia Street

\_\_\_\_\_  
Address

Pensacola, FL 32502

\_\_\_\_\_  
City/State and Zip Code

SDW@BeggsLane.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Stephen D. Wilson, Esq.

850

292-3342

\_\_\_\_\_  
Name of Contact Person

at ( )

Area Code

Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

\$125.00 Filing Fee     \$130.00 Filing Fee & Certificate of Status     \$155.00 Filing Fee & Certified Copy     \$160.00 Filing Fee, Certificate of Status & Certified Copy

{{(H24000032781 3)}}

{{(H24000032781 3)}}

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

IN COMPLIANCE WITH SECTION 805.022, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. CLEARED TO CLEAN, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. Virginia 85-0498189
(Dominion under the law of which foreign limited liability company is organized) (EIN number, if applicable)

4.
(Has not transacted business in Florida, if new to registration)
(See sections 804.006 & 804.005, F.S., to determine penalty liability)

5. 236 Patriot St
(Street Address of Principal Office)
Stephenson, VA 22656
6. 236 Patriot St
(Mailing Address)
Stephenson, VA 22656

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Stephen D. Wilson, Esq.
Office Address: 501 Commendancia Street
Pensacola, Florida 32502
(City) (Zip code)

FILED
2024 JAN 24 PM 1:49
SECRETARY OF STATE
TALLAHASSEE, FL

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.

[Signature]
(Registered agent's signature)

{{(H24000032781 3)}}

{{(H24000032781 3)}}

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):

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: Abel Jorge Nicola III	<input checked="" type="checkbox"/> Manager	Name: Timothy Scott Clayborn Jr.
<input type="checkbox"/> Member	Address: 236 Patriot St	<input type="checkbox"/> Member	Address: 236 Patriot St
<input type="checkbox"/> Authorized Person	Stephenson, VA 22656	<input type="checkbox"/> Authorized Person	Stephenson, VA 22656
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

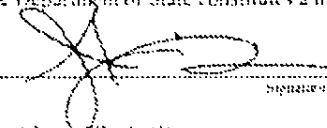
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	_____	<input type="checkbox"/> Authorized Person	_____
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized Person	_____	<input type="checkbox"/> Authorized Person	_____
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed 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.

  
 \_\_\_\_\_  
Signature of an authorized person  
 Abel Jorge Nicola III  
 \_\_\_\_\_  
Typed or printed name of signer

{{(H24000032781 3)}}

{{(H24000032781 3)}}

# Commonwealth of Virginia



## State Corporation Commission

### CERTIFICATE OF FACT

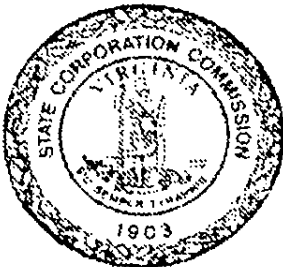
I Certify the Following from the Records of the Commission:

That Cleared To Clean, LLC is duly organized as a Limited Liability Company under the law of the Commonwealth of Virginia;

That the Limited Liability Company was formed on March 23, 2020; and

That the Limited Liability Company is in existence in the Commonwealth of Virginia as of the date set forth below.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date:

January 9, 2024

A handwritten signature in cursive script, appearing to read "Bernard J. Logan".

Bernard J. Logan, Clerk of the Commission

{{(H24000032781 3)}}

CERTIFICATE NUMBER 2024010510687223