

L 010000003941

CCS ENT.  
61320 9TH ST EAST  
TREASURE IS FL 33706

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1. CCS ENT., LLC (Corporation Name) / (Document #)
- 2. (Corporation Name) / (Document #) W-1-5030
- 3. (Corporation Name) / (Document #)
- 4. (Corporation Name) / (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

400003790834--6  
-03/01/01--01040--002  
\*\*\*\*155.00 \*\*\*\*155.00

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

FILED  
01 MAR 15 AM 8:21  
CLERK OF STATE  
TALLAHASSEE FLORIDA  
W 9/15

Examiner's Initials

480

**CCS ENT., LLC.**

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February 27, 2001

CRAIG C. SCOTT  
11320 9th STREET EAST  
TREASURE ISLAND FL. 33706  
(727) 363-6810 Home / (727) 743-6810 Office

To whom it may concern, this will be an Home Inspection business. I will be the owner and the only inspector at this time. Thank You for any help you can provide to get this through channels within 5 business days.

Sincerely



Craig C. Scott

FILED  
01 MAR 15 AM 8:21  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

March 6, 2001

CRAIG C. SCOTT  
CCS ENT., LLC  
11320 9TH STREET EAST  
TREASURE ISLAND, FL 33706

SUBJECT: CCS ENT., LLC  
Ref. Number: W01000005030

We have received your document for CCS ENT., LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 487-6958.

Lee Rivers  
Document Specialist

Letter Number: 901A00013539

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01 MAR 15 AM 8:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

CCS ENT., LLC.,

## ARTICLE II - Address:

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

119 108 AVENUE N #101

TREASURE ISLAND FL. 33706

11320 9th STREET EAST

TREASURE ISLAND FL. 33706

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

CRAIG C. SCOTT

Name

11320 9th STREET EAST

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

TREASURE ISLAND FL 33706

City, State, and Zip

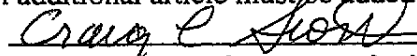
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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 608, F.S..*

  
Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

  
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.)

CRAIG C SCOTT

Typed or printed name of signee

### Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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01 MAR 15 AM 8:21  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA