

Richard A Sorenson

Requester's Name

1809 Precious Circle

Address

Apopka FL 32712 407 4647007

City/State/Zip

Phone #

L02000003755

Office Use Only

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

1. CHLOROZONE, LLC

(Corporation Name)

(Document #)

2. _____

(Corporation Name)

(Document #)

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

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

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

REGISTRATION/QUALIFICATION

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

100004931391--8
-02/15/02--01054--003
***125.00 ***125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB 15 PM 2:33

APPROVED
AND
FILED

JB
2-1502

ARTICLES OF ORGANIZATION
OF
CHLOROZONE, L.L.C.

Pursuant to Florida Statute 608.407 the undersigned states as follows:

1. The name of the limited liability company is:

CHLOROZONE, L.L.C.

2. The address of the registered office in Florida is:

Mailing address is the same!
1809 PRECIOUS CIR.
APOPKA, FLORIDA 32712

located in the County of **ORANGE**.

3. The registered agent's name and address is

RICHARD A. SORENSON
1809 PRECIOUS CIR.
APOPKA, FLORIDA 32712

4. There are or will be two or more members at the time the limited liability company is formed.

5. The latest date on which the limited liability company is to dissolve is **December 31, 2052.**

6. The members shall, by approval of one or more members of the company, have the right to admit additional members to the company.

7. The remaining members of the limited liability company shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company.

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8. ☒ Management of the limited liability company is vested in a manager or managers.

**RICHARD A. SORENSON
1809 PRECIOUS CIR.
APOPKA, FLORIDA 32712**

9. The name and address of each person who is a
☐ Manager
☒ Member
at the time of formation of the limited liability company is:

**RICHARD A. SORENSON
1809 PRECIOUS CIR.
APOPKA, FLORIDA 32712**

**C. DEAN THEM
4850 S. HIGHLAND CIR.
HOLLADAY, UATH 84117**

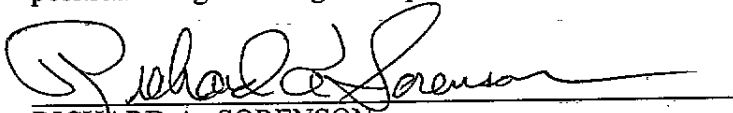

RICHARD A. SORENSON

DATED: Feb 15, 2002

APPROVED
AND
FILED
FEB 15 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Affidavit of Acceptance of Registered Agent

I, **RICHARD A. SORENSON**, having been designated to act as Registered Agent, and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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, Florida Statutes.


RICHARD A. SORENSON

DATED: Feb 15, 2002

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACKNOWLEDGEMENT

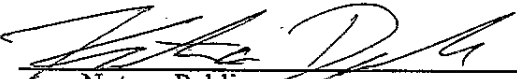
STATE OF FLORIDA }
 Leon KD } ss.
County of ORANGE }

On this 15th day of February, 2002, RICHARD A. SORENSON (Member),
personally appeared before me and acknowledged the execution of the foregoing instrument for
the purposes therein set forth.

5662-741-33-147

MY COMMISSION EXPIRES:

Dec. 9, 2004


Notary Public



Kristina Darnell
MY COMMISSION # CC982081 EXPIRES
December 9, 2004
BONDED THRU TROY FAIR INSURANCE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB 15 PM 2:30

APPROVED
AND
FILED