

# L020000 10724

Here is the requested information:

Omni Clean  
Owner: Lonnie R. and Esther M. Chausse  
P.O. Box 2031  
Palatka, Florida 32178

FILED  
2002 APR 25 AM 9:09  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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-04/15/02-01069--008  
\*\*\*125.00 \*\*\*125.00

W02-10827  
J. BRYAN APR 17 2002

J. BRYAN MAY 6 2002



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

April 17, 2002

LONNIE R. & ESTHER M. CHAUSSE  
PO BOX 2031  
PALATKA, FL 32178

SUBJECT: OMNI CLEAN LLC  
Ref. Number: W02000010827

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TALLAHASSEE, FLORIDA

We have received your document for OMNI CLEAN LLC and your check(s) totaling \$125.00. 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 the original and one copy of 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) 245-6043.

Joey Bryan  
Document Specialist  
Tax Liens

Letter Number: 302A00022908

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is: Omni Clean LLC

## ARTICLE II - Address:

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

mailing - P.O. Box 2031 Palatka, FL 32178  
street - 4103A Silver Lake Dr. Palatka, FL 32178

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

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

Lonnie R. Chausse

Name

4103A Silver Lake Dr.

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

Palatka FL 32178

City, State, and Zip

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*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.*

Lonnie R. Chausse

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)

Lonnie R. Chausse

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.)

Lonnie R. Chausse

Typed or printed name of signer

### 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)