

W5000005810

00789-00524-00423-00671 check name spelling

Great Weather Cleaners LLC

PO Box 46212

Panama City, FL 32406

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

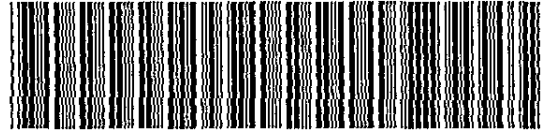
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05 JAN 19 PM 3:28
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

December 22, 2004

GREAT NORTHWEST CLEANERS L.L.C.
P.O. BOX 16212
PANAMA CITY, FL 32406

SUBJECT: GREAT NORTHWEST CLEANERS L.L.C.
Ref. Number: W04000046718

We have received your document for GREAT NORTHWEST CLEANERS L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the spelling of the company name in Article I - Name. Should the second word be NORTHWEST?,

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) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 904A00071072

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
GreatNorthWestCleaners L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
1988 Eva Place Chipley, Florida 32428

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

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

Michael Deem
Name
1988 Eva Place
Florida street address (P.O. Box NOT acceptable)
Chipley FL 32428
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.

Michael Deem
Registered Agent's Signature

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

Michael Deem
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.)

Michael Deem
Typed or printed name of signee

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TALLAHASSEE FLORIDA

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)