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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 10, 2005

LANCE MOFFETT 1012 WOODBURY PLACE CANTONMENT, FL 32533

SUBJECT: C AND L MOVING SERVICES, LLC

Ref. Number: W05000012384

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We have received your document for C AND L MOVING SERVICES, 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):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 205A00016564

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ARTICLE I - Name: The name of the Limited Liability Company is	s:	23651 55EC	
	Cand L Moving Service	5,44C.	MAR 16	et case
	ARTICLE II - Address:			,
	The mailing address and street address of the	principal office of the Limited	d Liability Company is:	
	Principal Office Address:	Mailing Address:	56	
	Cantonment FL 32533	CANTL MOUNG 1012 woodball CANTONIMENT, FL	SCRVICES CHARLE Place 32533	
•	ARTICLE III - Registered Agent, Registered The name and the Florida street address of the		nt's Signature:	
Lance	Moter Cand & more	AG SIRINGS HC		
	5082 Mathews	Rd.		
	Pace Florida street an	ddress (P.O. Box NOT acceptable)	7/ **	
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 Signature

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Lance Mother
	Cartenner Fl. 32533
MGRM	Chris Swain
	Cantenment FL 32533
	2005 II AR
	ASSET
(Use attachment if necessary)	3: 56
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NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or apparthorized 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.)

Land White

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)