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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

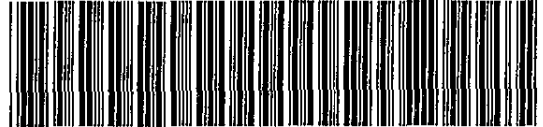
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Clark-Branz, LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Corinne K. Clark  
(Name of Person)

\_\_\_\_\_  
(Firm Company)

6447 Engram Road  
(Address)

New Smyrna Beach, FL 32169  
(City State and Zip Code)

For further information concerning this matter, please call:

Corinne K. Clark at (386) 428-7948  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☒ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**STREET ADDRESS:**  
Registration Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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**ARTICLES OF ORGANIZATION  
OF  
CLARK-BRANZ, LLC**

**ARTICLES I - NAME**

The name of this limited liability company is CLARK-BRANZ, LLC (the "Company").

**ARTICLE II - PRINCIPAL OFFICE**

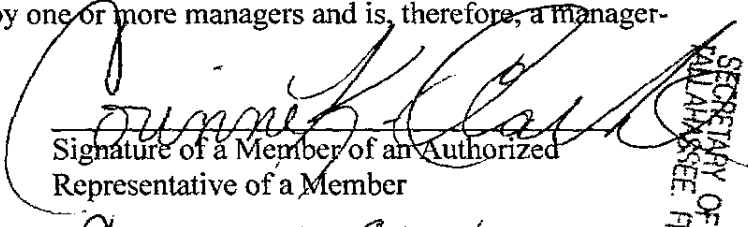
The mailing address of the principal office of the Company is 6447 Engram Road, New Smyrna Beach, Florida 32169, and the street address of the Company is 6447 Engram Road, New Smyrna Beach, Florida 32169.

**ARTICLES III - INITIAL REGISTERED OFFICE AND AGENT**

The street address of the initial registered office of the Company is 6447 Engram Road, New Smyrna Beach, Florida 32169, and the name of the initial registered agent of the Company at that address is Corinne Kimberly Clark.

**ARTICLE IV - MANAGEMENT**

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

  
Signature of a Member of an Authorized  
Representative of a Member

Corinne K. Clark  
Typed or Printed Name of Signer

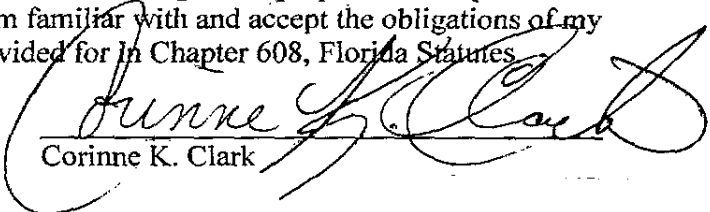
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**ACCEPTANCE OF REGISTERED AGENT**

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, Florida Statutes.

  
Corinne K. Clark