

L05000084848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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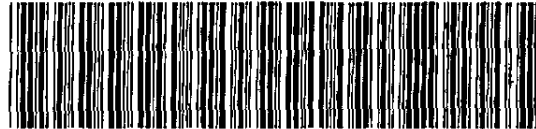
(Business Entity Name)

(Document Number)

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2005 AUG 26 PM 1:20
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

W05-36188
J. BRYAN AUG - 1 2005

J. BRYAN AUG 26 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Clear2Close, Limited
(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:

Brooke Knoedler

(Name of Person)

Search2Close of Columbus, Limited

(Firm/Company)

3000 Corporate Exchange Drive, Suite 401

(Address)

Columbus, OH 43231

(City/State and Zip Code)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Brooke Knoedler

(Name of Person)

at (614) 212-5322

(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 1, 2005

BROOKE KNOEDLER
SEARCH2CLOSE OF COLUMBUS, LIMITED
3000 CORPORATE EXCHANGE DRIVE, SUITE 401
COLUMBUS, OH 43231

SUBJECT: CLEAR2CLOSE, LIMITED
Ref. Number: W05000036188

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

We have received your document for CLEAR2CLOSE, LIMITED and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 705A00049564

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Clear & Close, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

3000 Corporate Exchange Drive

5121 Ehrlich Road, Suite

Suite 401

Suite 108b

Columbus, OH 43231

Tampa, FL 33624

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

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

Brandon Moser

Name

3131 Diamond Knot Circle,

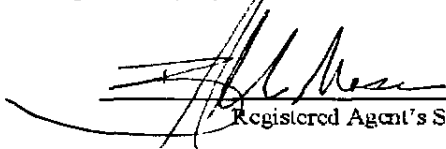
Florida street address (P.O. Box **NOT** acceptable)

Tampa, FL 33607

FL

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's Signature

(CONTINUED)

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2005 AUG 26 PM 1:30
CLARK COUNTY, FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

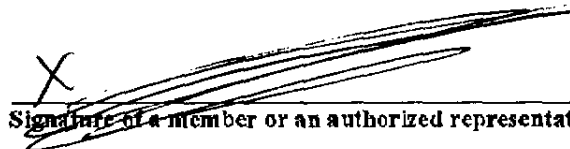
Kevin Alexander
(MGRM)

3000 Corporate Exchange Drive
Suite 401
Columbus, OH 43231

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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.)

Kevin R Alexander

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)**

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TALLAHASSEE, FLORIDA
CORPORATIONS