

LO7000008791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

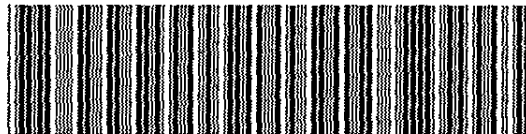
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 10, 2007

LYNN STEINCAMP JR.
CLEARED HOT CONSTRUCTION LLC
P.O.BOX 112272
NAPLES, FL 34108

SUBJECT: CLEARED HOT CONSTRUCTION LLC
Ref. Number: W07000001447

We have received your document for CLEARED HOT CONSTRUCTION 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):

Florida law requires the street address of the principal office and, if different, the mailing address of the entity. A post office box is not acceptable for the principal 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) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 907A00002188

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STATE
TALLAHASSEE, FLORIDA

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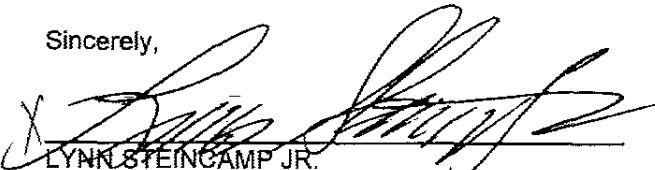
DATE 1-3-07

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, Florida 32314

SUBJECT: CLEARED HOT CONSTRUCTION LLC

I have enclosed the original and one copy of the Articles of Organization. You will also find my check for \$155.00 to cover the cost of the Filing Fees, Certified Copy of the Articles of Incorporation and Fee for Registered Agent Designation for the above named LLC.

Sincerely,


LYNNE STEINCAMP JR.

Please send accepted Articles of Organization to the following address:

CLEARED HOT CONSTRUCTION LLC
PO BOX 112272
NAPLES, FL. 34108

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I -Name:

The name of the Limited Liability Company is: CLEARED HOT CONSTRUCTION LLC

ARTICLE II -Address:

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

Street address: 1000 WIGGINS PASS, #156, NAPLES, FL. 34110

Mailing address: PO BOX 112272, NAPLES, FL. 34108

ARTICLE III -Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Name

LYNN STEINCAMP JR

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

1000 WIGGINS PASS, #156

FL City, State, and Zip

NAPLES, FL. 34110

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



Article IV Manager(s) or Managing Member(s)

Title

MGRM

Name and Address

LYNN STEINCAMP JR

1000 WIGGINS PASS, #156

NAPLES, FL. 34110

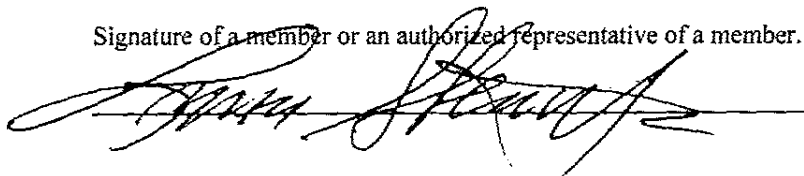
Article V -Management (Check box if applicable.)

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

ARTICLE V: Effective Date

The effective date is WHEN FILED

Signature of a member or an authorized representative of a member.



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