

L08000045054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

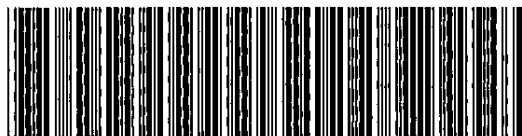
(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 MAY -5 PM 12:19

T. HAMPTON

MAY - 6 2008

EXAMINER

0508-2050

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: All-n-1 Landscaping & Design, 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:

Ulysses Butler
(Name of Person)

(Firm Company)

1763 Scrub Jay rd.
(Address)

Apopka, FL 32703
(City State and Zip Code)

For further information concerning this matter, please call:

Ulysses Butler at 407 509-1237
(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)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 MAY -5 PM 4:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 22, 2008

EXTREMELY CLEAN MOBILE DETAILING, LLC
1763 SCRUB JAY RD
APOPKA, FL 32703-1687

SUBJECT: ALL-N-1 LANDSCAPING & DESIGN, LLC
Ref. Number: W08000020292

We have received your document for ALL-N-1 LANDSCAPING & DESIGN, LLC and check(s) totaling \$50.00. However, your check(s) and document are being returned for the following:

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

Your document does not meet current filing requirements. For your convenience, we are enclosing the correct form and instructions.

There is a balance due of \$75.00.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 308A00024128

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

All-n-1 Landscaping & Design, LLC.
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

1763 Scrub Jay rd.
Apopka, FL 32703

Mailing Address:

1763 Scrub Jay rd.
Apopka, FL 32703

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Ulysses Butler
Name
1763 Scrub Jay rd.
Florida street address (P.O. Box NOT acceptable)
Apopka FL 32703
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.

Ulysses Butler
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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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:

MGRM

Ulysses Butler
1763 Scrub Jay rd.
Apopka, Fl. 32703

MGRM

Nicholas Jones
3706 Wade rd.
Orlando, Fl. 32808

MGRM

Timothy Butler
1763 Scrub Jay rd.
Apopka, Fl. 32703

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Ulysses Butler
Signature of 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.)

Ulysses Butler
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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