

L08000071131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

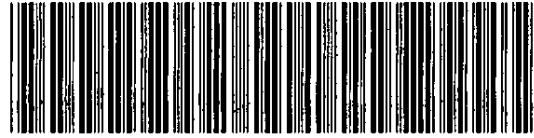
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08 JUL 23 AM 10:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

JUL 24 2008

EXAMINER

86868-80m

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: C&C Lawn and Garden Services, 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:

William Charles Moody

(Name of Person)

(Firm/Company)

P.O. Box 506

(Address)

Raiford, FL 32083

(City/State and Zip Code)

For further information concerning this matter, please call:

William Charles Moody

(Name of Person)

at (**386**) **431-1152**

(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 JUL -8 PM 12:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 20, 2008

WILLIAM CHARLES MOODY
P O BOX 506
RAIFORD, FL 32083

SUBJECT: C&C LAWN AND GARDEN SERVICES, LLC
Ref. Number: W08000029898

We have received your document for C&C LAWN AND GARDEN SERVICES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records show no entity by the name THE LAW OFFICES OF DOUGLASE MASSEY. The name of the registered agent must be the same as listed on our database for the corporation/fictitious name listed.

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: 408A00037614



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 JUL 23 PM 1:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 9, 2008

WILLIAM CHARLES MOODY
P O BOX 506
RAIFORD, FL 32083

SUBJECT: C&C LAWN AND GARDEN SERVICES, LLC
Ref. Number: W08000029898

We have received your document for C&C LAWN AND GARDEN SERVICES, LLC and your check(s) totaling \$160.00. 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 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: 408A00040519

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

C&C Lawn and Garden Services, 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:

11678 South CR 229
Raiford FL 32083

Mailing Address:

P.O. Box 506
Raiford FL 32083

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:

William Charles Moody
Name
11678 South CR 229
Florida street address (P.O. Box NOT acceptable)
Raiford FL 32083
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..

William C. Moody
Registered Agent's Signature (REQUIRED)

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:

Manager

William Charles Moody

P.O. Box 506


Raiford Fl. 32083

(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:


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.)

x **William Charles Moody**

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)

FILED
08 JUL 23 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA