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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

## **COVER LETTER**

10. Registration 5				
Division of Co	orporations	•	•	
SUBJECT: CLEAR	N-ALL CLEANING & F	PAINTING, LLC		
	(Name of Limite	d Liability Company)		
The enclosed Articles of	of Organization and fee(s) are s	submitted for filing.		
Please return all corresp	pondence concerning this matte	er to the following:		
WILLIAM (	D. SANDERS			
<del></del>	(	Name of Person)		
CLEAN-AL	L CLEANING & PAI	NTING, LLC		
<u> </u>	(	(Firm/Company)	SEC S	~
8416 OLD	E POST ROAD		AHARE	
		(Address)	SSI	
TALLAHA	SSEE, FLORIDA	32311	right H	5
	(City	/State and Zip Code)	95 2	
For further information	concerning this matter, please	call:	S. C.	
VARIATIONALO CAN	IDEDO	050 000 0070		
WILLIAM O. SAN	of Person)	at (850) 933-6673 (Area Code & Daytime Te		
<b>(</b> -7,2,1)		(inde dodd to buy inito it	repriore realipery	
Enclosed is a check for	or the following amount:			
3125.00 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 Corporation Clifton Building 2661 Executive Center ( Tallahassee, FL 32301	s	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is	
CLEAN-ALL CLEANING & PAINTING, LLC	
(Must end with the words "Limited Liability Company, "Limit	ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8418 OLDE POST ROAD	8418 OLDE POST ROAD
TALLAHASSEE, FLORIDA 32311	
	TALLAHASSEE, FLORIDA 32311 07
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the interest and interest address of the interest address.	tered Agent. You must designate an individual openotification
WILLIAM O. SANDERS	
Name	•
8416 OLDE POST ROAD	
Florida street add	dress (P.O. Box <u>NOT</u> acceptable)
TALLAHASSEE	Ft. 32311
City, State,	ınd Zip
Having been named as registered agent and to liability company at the place designated in tregistered agent and agree to act in this capacity	accept service of process for the above stated limited

(CONTINUED) Page 1 of 2

Registered Agent's Signature'(REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:	,
"MGRM" = Managing Member	٠,	
MGRM	WILLIAM O. SANDERS 8416 OLDE POST ROAD	· · · · · · · · · · · · · · · · · · ·
	TALLAHASSEE, FLORIDA 32311	
MGRM	RODNEY T. SANDERS	
	8416 OLDE POST ROAD TALLAHASSEE, FLORIDA 32311	7 8 8
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		SS TO
	·	
		- RECEIVED
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the		(OPTIONAL)
(If an effective date is listed, the date must be to or 90 days after the date of filing.)	e specific and cannot be more than	a five business days prior
<u>REQUIRED</u> SIGNATURE:	•	
(d) mg		•
Signature of a membe	r or an authorized representative of a r	nember.

WILLIAM O. SANDERS

that the facts stated herein are true.)

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

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)