L09000095708

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2009 OCT -2 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
Oct. 5, 2009
EXAMINER

FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 21, 2009

DALE DIDOMENICO / CLEAR-STARS LLC
PO BOX 33753
INDIALANTIC, FL 32903

SUBJECT: CLEAR-STARS LLC
Ref. Number: W09000042204

Changed to Astro-Smart, LLC
10-5-09

We have received your document for CLEAR-STARS 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division s records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 109A00030879

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: Clear-STARS 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:

Dale DiDomenico or J. Timothy Middendorf
Name of Person

Clear-STARS LLC
Firm/Company

PO Box 33753
Address

Indialantic, FL 32903
City/State and Zip Code

dale@clear-stars.com // tim@clear-stars.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dale DiDomenico at (321) 480-1190
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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

ASTRO-SMART, 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:	**Mailing Address:**
440 Mosswood Blvd,Indialantic,FL 32903	PO Box 33753 Indialantic, FL 32903
1885 Nicklaus Dr.,Melbourne, FL 32935	PO Box 33753 Indialantic, FL 32903

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.)

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TALLAHASSEE, FLORIDA

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

Dale DiDomenico
Name

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

Indialantic, FL 32903 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 (REQUIRED)

(CONTINUED)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	**Name and Address:**
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Dale DiDomenico 440 Mosswood Blvd. Indialantic, FL 32903
MGRM	J. Timothy Middendorf 1885 Nicklaus Dr. Melbourne, FL 32935

(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.)

Dale DiDomenico
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)