L11000046235

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer: L. SELLERS
APR 1 9 2011
FXAMINER

Office Use Only

900201856189

04/15/11--01042--012 **130.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: Gary's Carpet Cleaning IV
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:
Christopher Jason Andrews
Name of Person
Gary's Carpet Cleaning IV
Firm/Company
609 15th Ave. West
Address
Palmetto, Florida 34221
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christopher Jason Andrews at (941) 779-3288
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}\$ Certificate of Status \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

TILTU

11 APR 15 AM 10: 46

SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	\mathbf{R}'	ΤI	\mathbf{C}	LE	I	_	N	a	m	e	:
---	---------------	----	--------------	----	---	---	---	---	---	---	---

The name of the Limited Liability Company is:

Gary's Carpet Cleaning IV 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:
609 15th Ave. West	609 15th Ave. West
Palmetto, Florida 34221	Palmetto, Florida 34221
Palmetto, Florida 34221	Palmetto, Florida 34221

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:

Christophe	r Jason Andrews
	Name
609 15th	Ave. West
	Florida street address (P.O. Box NOT acceptable)
Palmetto	_{FL} 34221
	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..

molares

Registered Agent's Signature (REQUIRED

(CONTINUED)

Page 1 of 2

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

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

MGMR	Christopher Jason Andrews
	609 15th Ave. West
	Palmetto, Florida 34221
	
Use attachment if necessary)	
LEV: Effective date, if other t	han the date of filing: May 1, 2011 . (OPTION
ective date is listed, the date	must be specific and cannot be more than five business da

Signature of a member of 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Christopher Jason Andrews

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)