# L11000078924

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
:				

Office Use Only



400208382864

06/06/11--01047--012 \*\*160.00

11 JUL -7 PH 2: 11

B. BOSTICK

UUL - 8 2011

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: CENTRAL Florida Renewable Energy CORP 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:	
HLTAMGE Fle ming Name of Person	
Name of Person	
Firm/Company	
1/10 7 Ros 2: 02	
Address	
Address  SEFFNER, Flq. 33584  City/State and Zip Code  Central florida renewable energy c 9 mail. com  E-mail address: (to be used for future addual report notification)	
City/State and Zip Code	**************************************
E-mail address: (to be used for future andual report notification)	Landonse Consta
For further information concerning this matter, please call:	1 5 8
ALTANCIE FLEming at (202) 460-0399 55 79  Name of Person Area Code & Daytime Telephone Number 577	
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 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:

		Torida Renewa			
	ARTICLE II - Ad	st end with the words "Limited Liabilit dress: s and street address of the pri			npany is:
	Principal Office A	ddress:	Mailing Address:		
	11097 Bessie Dix RD 11097 Bessie Dix SEFFNER FIG. 33584 SEFFNER FIG. 33584				<u>7</u> D
	(The Limited Liability Cobusiness entity with an a	egistered Agent, Registered ompany cannot serve as its own Registeretive Florida registration.)	red Agent. You must designate		
		Florida street address of the re	<del>-</del>	जा। १३-४ ८७	
Altamese	fleming	11097 BESSIE D Name SEFFLIER, FIG.		- SECOPEO	
		Florida street add	ress (P.O. Box <u>NOT</u> accepta FL 33584	FLORIDA	
		City, Sta	te, and Zip		
	liability compar registered agent an	ed as registered agent and to a ny at the place designated in th nd agree to act in this capacity to the proper and complete per	nis certificate, I hereby a . I further agree to com	eccept the appointm ply with the provis	nent as ions of all

(CONTINUED)

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>	Name and Address:		
"MGR" = Manager "MGRM" = Managing Member			
MGRM	ALTAMESE FLEMING 319 HLAST AIR ST		
MURM	STEVEN Jackson  11097 BESSIE DIX REGGE = SEFFINER FLORISSES Y		
marm	Brandy Jackson 45 27 GEORGIA ANE WAShiroton, DC 20011		
MGRM	Anlene Fleming 33 - 319 ALASTAIL ST DONY		
(Use attachment if necessary)			
ARTICLE V: Effective date, if other than the color and effective date is listed, the date must be o or 90 days after the date of filing.)	date of filing: (OPTIONAL) specific and cannot be more than five business days prior		
REQUIRED SIGNATURE:  Attorner  Signature of a member	Memory or an authorized representative of a member.		
	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.)

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)



June 7, 2011

ALTAMESE FLEMING 11097 BESSIE DIX ROAD SEFFNER, FL 33584

SUBJECT: CENTRAL FLORIDA RENEWABLE ENERGY CORP.

Ref. Number: W11000031064

We have received your document for CENTRAL FLORIDA RENEWABLE ENERGY CORP. and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Please return 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) 245-6028.

Barbara Bostick Regulatory Specialist II

Letter Number: 211A00013923