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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

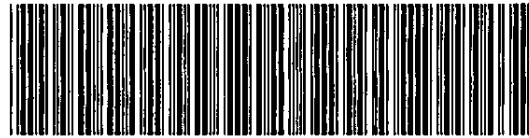
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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T. CLINE

AUG 29 2011

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 22, 2011

CECIL JOHNSON  
1606 STAFFORD RD  
LEESBURG, FL 34748

SUBJECT: C AND V GENERAL LAWN & LANDSCAPING  
Ref. Number: W11000041353

We have received your document for C AND V GENERAL LAWN & LANDSCAPING 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 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 amend your document accordingly.

The suffix Ltd. Co. can not be used. You can use Ltd. Liability Co., but not Ltd. Co.

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) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 611A00019575

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 8, 2011

CECIL JOHNSON  
1606 STAFFORD RD  
LEESBURG, FL 34748

SUBJECT: C AND V GENERAL LAWN & LANDSCAPING  
Ref. Number: W11000041353

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You must insert the letters " MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

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) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 711A00018560

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Cecil & Victoria Landscaping & maintenance  
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:

Cecil & Victoria Johnson  
Name of Person

Cecil & Victoria Landscaping & maintenance  
Firm/Company

1606 Stafford Rd.  
Address

Leesburg, FL 34748  
City/State and Zip Code

Vikki4God@Embarrmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cecil Johnson at (352) 989-0184  
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

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TALLAHASSEE, FLORIDA

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

C & V General Lawn & Landscaping Limited Liability  
Company, L.L.C.  
(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:

108 Kaolin St.  
Leesburg, FL 34748

#### Mailing Address:

1606 Stafford Rd.  
Leesburg, FL 34748

### 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:

Cecil Johnson  
Name  
1606 Stafford Rd  
Florida street address (P.O. Box **NOT** acceptable)  
Leesburg FL 34748  
City, State, and Zip

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*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.*

Cecil L. Johnson  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**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:**

\_\_\_\_\_ MGR

Cecil L. Johnson  
1606 Stafford Rd  
Leesburg, FL 34748

\_\_\_\_\_ -MGR

Victoria L. Johnson  
1606 Stafford Rd  
Leesburg, FL 34748

\_\_\_\_\_

MGR  
Cecil L. Johnson  
1606 Stafford Rd. Leesburg, FL 34748

\_\_\_\_\_

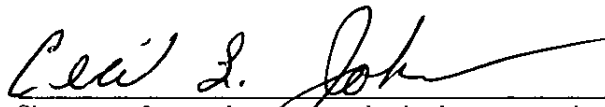
MGR  
Victoria L. Johnson  
1606 Stafford Rd. Leesburg, FL 34748

(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. 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.)

Cecil L. Johnson

Typed or printed name of signer

**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)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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