

# L 12000003928

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(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. B. BLY  
EXAMINER

JAN 9 2012



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 5, 2012

JAMES T KRAUSE  
2761 YAMADA LANE  
NORTH PORT, FL 34286

SUBJECT: ALL KLEAN SERVICES LLC  
Ref. Number: W12000000834

We have received your document for ALL KLEAN SERVICES LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly  
Regulatory Specialist II

Letter Number: 512A00000319

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: All Klean Services 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:

James T. Krause

Name of Person

All Klean Services

Firm/Company

2761 Yamada Lane

Address

North Port, Florida 34286

City/State and Zip Code

jtkause@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James Krause

Name of Person

at ( 585 )

261-3752

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

Street/Courier Address

Registration Section  
Division of Corporations

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

**All Klean Services 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:

2761 Yamada Lane  
North Port, FL 34286

#### Mailing Address:

2761 Yamada Lane  
North Port, FL 34286

### 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:

James T. Krause

Name

2761 Yamada Lane

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

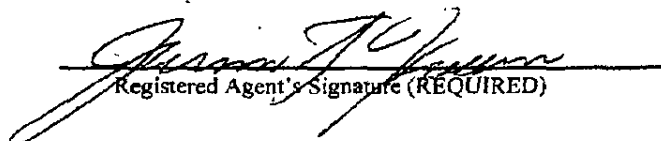
North Port

FL 34286

City, State, and Zip

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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)

**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

James T. Krause  
2761 Yamada Lane  
North Port, Fl. 34286

MGRM

Linda M. Krause  
2761 Yamada Lane  
NORTH PORT, FL 34286

(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.)

James T. Krause