## 11200028168

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Вс	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	•	

Office Use Only

G. MCLEOD

FEB 28 2012

**EXAMINER** 



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## **COVER LETTER**

Division of Co			
SURJECT. Done	With Clutter, LLC	<b>;</b>	
30D0ECT.		ed Liability Compa	any
The enclosed Articles of	of Organization and fee(s) are	submitted for filing	g.
Please return all corresp	ondence concerning this matt	er to the following	;
Lu Anne	Dunn		
		Name of Person	
Done	With Clut	ter, LLC	
		Firm/Company	
3620 Tay	side Court		
•		Address	
Apopka, Fl	orida 32712		
	Cit	y/State and Zip Code	:
luanne.dun	n@gmail.com		
<del> </del>	E-mail address: (to be used f	or future annual repo	ort notification)
For further information	concerning this matter, please	call:	
Lu Anne Dunn		at (407	718-7925
Name	of Person	Area Code	& Daytime Telephone Number
	or the following amount:	155 00 E:::-	Too & Confession For
\$125.00 Filing Fee		\$155.00 Filin Certified Co (additional copy	Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	on Section of Corporations uilding extive Center Circle ee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Dono With Chi	#or 110		
Done With Clu		nited Liability Company, "L.L.C.," or "LLC.")	<del>_</del>
(Mass Cir	d with the words Lin	mica Elabinty Company, E.E.C., of EEC. )	
ARTICLE II - Addre The mailing address an		of the principal office of the Limited Liability	Company is:
Principal Office Adda	ress:	Mailing Address:	
3620 Tayside Court		3620 Tayside Court Apopka, FL 32712	_
Apopka, FL 32712	<del> </del>	Αρορια, 1 Ε 32 1 12	<del>_</del>
(The Limited Liability Compar	ny cannot serve as its	egistered Office, & Registered Agent's Signa own Registered Agent. You must designate an individual or a	
(The Limited Liability Compar business entity with an active The name and the Flori	ny cannot serve as its e Florida registration.)	own Registered Agent. You must designate an individual or a	
(The Limited Liability Compar business entity with an active The name and the Flori	ny cannot serve as its Florida registration.) ida street address	own Registered Agent. You must designate an individual or a	
(The Limited Liability Comparbusiness entity with an active) The name and the Flori	ny cannot serve as its Florida registration.) ida street address	own Registered Agent. You must designate an individual or a soft the registered agent are:	
(The Limited Liability Comparatusiness entity with an active)  The name and the Flori  Lu  36	iny cannot serve as its e Florida registration.) ida street address a Anne Dunn 620 Taysid Florida	own Registered Agent. You must designate an individual or a soft the registered agent are:  Name    Court   Street address (P.O. Box NOT acceptable)	12 FEB 27
(The Limited Liability Comparatusiness entity with an active)  The name and the Flori  Lu  36	ny cannot serve as its Florida registration.) ida street address Anne Dunn 520 Taysid	own Registered Agent. You must designate an individual or a soft the registered agent are:  Name  IE Court  a street address (P.O. Box NOT acceptable)  FL 32712	12 FEB 27 PM
(The Limited Liability Comparatusiness entity with an active)  The name and the Flori  Lu  36	iny cannot serve as its e Florida registration.) ida street address a Anne Dunn 620 Taysid Florida	own Registered Agent. You must designate an individual or a soft the registered agent are:  Name    Court   Street address (P.O. Box NOT acceptable)	12 FEB 27

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Membe	·r
Williaging William	•
MGR	Lu Anne Dunn
	3620 Tayside Court
	Apopka, FL 32712
	<del></del>
	· · · · · · · · · · · · · · · · · · ·
**************************************	
(Use attachment if necessary)	
TE 10 17 17 17 17 17 17 17 17 17 17 17 17 17	d to see 2/23/2012 (common to
LE V: Effective date, if other th	nan the date of filing: 2/23/2012 (OPTIONAL
nective date is listed, the date in days after the date of filing.)	nust be specific and cannot be more than five business days
days and the date of hing.	
<b>REQUIRED SIGNATURE:</b>	
$\mathcal{L} \wedge$	$\wedge$
(Du (In	medlenn
2-1-1-27	
Signature of a	member or an authorized representative of a member.

Lu Anne Dunn

Typed or printed name of signee

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.)

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)