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(Requestor's Name)	—
(Address)	
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PICK-UP WAIT MAIL	
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SECREDARY OF STAIR
TALLAHASSEE, FLORIDA

61:1 Hd

B. BOSTICK SEP I 2 2013 EXAMINER

COVER LETTER

TO:	Registration Sect Division of Corpo		**	. (N.,	gha e		
SUBJE	Clea	an Sweep F	oreclosu	re Trash-Oi	at			
	<u></u>	Nam	e of Limited	Liability Compa	any			
	closed Articles of O							
		Ste	ven M.	Neal				
•	(Clean Swee	ep Forecl	ame of Person OSURE Trash	1-Out			
•		9101	N. W. 17	Firm/Company 5 St.				
•		Miami C	ardens,	Address Fl. 33169				~
•		werclean		State and Zip Code yahoo.com			ALL ORD	13 SEP 11 PH 4: 49
-		E-mail address: (to be used for	future annual repo	ort notification)			
For furt	ther information con	cerning this mat	ter, please ca	all:				-0
5	Steven M. Nea	al		305	522-839) 3	71.0	-
	Name of F	erson	{	Area Code) e & Daytime Tele	phone Numbe	<u> </u>	64
	ed is a check for t	he following a \$130.00 Filing Certificate of	g Fee &	⊒\$155.00 Filin Certified Co (additional cop	ру	\$160.00 l Certifica Certified (additional	te of Stat Copy	us &
	j 1	Mailing Addres Registration Sect Division of Corp P.O. Box 6327 Tallahassee, FL	ion porations	Registrat Division Clifton B 2661 Exc	ourier Addression Section of Corporations Building ecutive Center (See. FL 32301	S		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	:	
Clean Sweep Foreclosure		
(Must end with the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liabili	ty Company is:
Principal Office Address:	Mailing Address:	
910 N. W. 175 St. Miami Gardens, Fl. 33169	910 N. W. 175 St. Miami Gardens, Fl. 33	<u>316</u> 9
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	stered Agent. You must designate an individual of	or another
The name and the Florida street address of the	registered agent are:	2013 SEP 11
Mary L. Neal-	Gervin	51 :-
Nam 15901 N.W. 18	e Sth Place	2013 SEP 11 PM 4: 49
Florida street a	ddress (P.O. Box NOT acceptable)	
Miami Gardens	s, _{FL} 33054	Er to
	State, and Zip	
University was a second as projectived agent and to	a account namina of munecon for the sha	no stated limited

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..

My L. Neal Hewww Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Steven M. Neal
	910 N. W. 175 St.
	Miami Gardens, Fl. 33169
MGRM	Fredrick Neal
	18850 S. W. 36 Ct.
	Miramar, Fl. 33027
MGRM	Beverly Neal
	— 910 N. W. 175 St. □ □
	Miami Gardens, Fl. 33169 デ デ
	532 -
	<u> </u>
(Use attachment if necessary)	FLORID
(,	7.0
ICLE V: Effective date, if other than the	
effective date is listed, the date must	
n effective date is listed, the date must to or 90 days after the date of filing.)	
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n effective date is listed, the date must to or 90 days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than five business of
reffective date is listed, the date must to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member	be specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than five business of the specific and cannot be more than the specific and
reffective date is listed, the date must to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with section 608.4 constitutes an affirmation under to 1 am aware that any false information to 1 and 1	or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. ation submitted in a document to the Department of State
REQUIRED SIGNATURE: Signature of a member (In accordance with section 608.4 constitutes an affirmation under to I am aware that any false information constitutes a third degree felony as	or an authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true.

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)