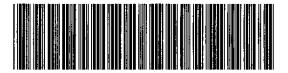
## 615000118006

(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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June 25, 2015

DIANE SAYLES 636 GRANDIFLORDA DR ORLANDO, FL 32811

SUBJECT: DS CRYSTAL CLEAN LLC

Ref. Number: W15000035411

We have received your document for DS CRYSTAL CLEAN LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return the corrected original and one copy of 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) 245-6051.

Letter Number: 715A00010505

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

www.sunbiz.org

## **COVER LETTER**

	Registration Division of C				
SUBJEC		STAL CLEAN LLC			
SUBJEC	1	Name of Li	mited Liabili	ty Company	
The enclo	osed Articles	of Organization and fee(s) a	re submitted	for filing.	
Please ret	turn all corres	pondence concerning this m	atter to the fo	ollowing:	
	DIANE SA	YLES			
			Name of	Person	
	DS CRYS	TAL CLEAN			
			Firm/Co	npany	
	636GRAN	DIFLORDA DR			
			Addre	ess	
	ORLANDO	O FL 32811			
	NMALCLO	( LM60@YAHOO.COM	City/State and	l Zip Code	
	<del></del>	E-mail address: (to be used	for future a	nnual report notificat	ion)
For further	information o	oncerning this matter, pleas	e call:		
	DIANE SA	YLES 40 at (	07	2182305	
	Na	· \		Daytime Telephon	e Number
Enclosed	is a check for	the following amount:			
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certifie	O Filing Fee & od Copy I copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mail</u>	ing Address	j	Street Address	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:

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: Mailing Address:
036 GRANDIFLORA DR 636 GRANDIFLORA 08LANDO, FL 08LANDO, FL 328/10, FL
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:
DIANE SAULES
Name V
636 GRANDIFLORA DR
Florida street address (P.O. Box NOT acceptable)
ORLANDO FL 32811
City State Zip
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 gam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. FS:

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	DIANE SAYLES 636 GRANDIFLORA DR OLLANDO, FL 32811
	<del></del>
(Use attachment if necessary)  CLE V: Effective date, if other than the date effective date is listed, the date must be sp	e of filing:
CLE V: Effective date, if other than the date effective date is listed, the date must be sp te of filing.)  If the date inserted in this block does not recument's effective date on the Department	meet the applicable statutory filing requirements, this date will not be lis
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ARTICLE IV-