

L16000058226

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16 MAR 24 PM 3:13 RECEIVED  
16 MAR 24 PM 3:02

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Spotless Cleaning 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:

Tammy Bowdry  
Name of Person

Firm/Company

49 Liberty Rd  
Address

Crawfordville, FL 32327  
City/State and Zip Code

tbowdry73@yahoo.com  
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_, at (\_\_\_\_\_) \_\_\_\_\_  
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

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

Street Address

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLE 1 - Name:

A1 Spotless Cleaning Services, LLC  
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

Lammy Bowdny  
49 Liberty Rd  
Crawfordville, FL 32327

Tammy Bowdrey  
Hq Liberty, Pa  
Crawfordville, FL 32327

Address of the registered agent are:  
 Tammy Bowdrey  
 Name  
 49 Liberty Rd  
 Florida street address (P.O. Box **NOT** acceptable)  
 Crawfordville, FL 32308  
 City State Zip

Sammy Bowdrie  
Registered Agent's Signature (REQUIRED)

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[illegible]

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

MGR

MGR

Name and Address:

Tammy Bowdry  
49 Liberty Rd  
Crawfordville, FL 32327

Joseph Walker  
89 Williams Ln  
Quincy, FL 32352

Tammy Bowdry  
49 Liberty Rd  
Crawfordville, FL 32327

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Tammy Bowdry

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.

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.

Tammy Bowdry

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)