

L16000155082

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

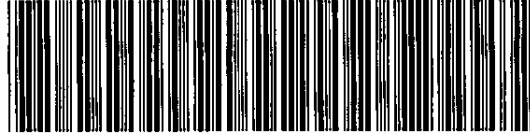
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 AUG 12 AM 9:00
SECRETARY OF REVENUE
FALL RIVER, MASSACHUSETTS

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8/22/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 2, 2016

TERRY J. VONCERHAAR
PO BOX 886
CRYSTAL RIVER, FL 34423-0866

SUBJECT: THE CAR CREDIT COMPANY, LLC
Ref. Number: W16000052657

We have received your document for THE CAR CREDIT COMPANY, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is s45967 (CAR CREDIT, INC.).

Please return 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) 245-6052.

TANYA L HENDERSON
Regulatory Specialist II

Letter Number: 716A00015904

16 AUG 12 AM 9:00
SECRET
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CREATIVE CAR CREDIT, 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:

TERRY J. VONDERHAAR

Name of Person

CREATIVE CAR CREDIT, LLC

Firm/Company

P. O. BOX 866

Address

CRYSTAL RIVER, FL 34423-0866

City/State and Zip Code

tjvoutfield@yahoo.com

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

For further information concerning this matter, please call:

TERRY J. VONDERHAAR 352 586-9277
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

16 AUG 12 AM 9:00
CERTIFIED MAIL
TALLAHASSEE, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CREATIVE CAR CREDIT, 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:703 N. MCGOWAN AVE.
CRYSTAL RIVER, FL 34429Mailing Address:PO BOX 866
Crystal River, FL
34423-0866

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:

TERRY J. VONDERHAAR

Name

703 N. MCGOWAN AVENUEFlorida street address (P.O. Box **NOT** acceptable)CRYSTAL RIVER FL 34429

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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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/MGRName and Address:ANTHONY MILLS1736 SE SUNCOAST BLVDHOMOSASSA, FL 34448AMBR/MGRRICHARD MACLEOD222 SE 1ST AVENUECRYSTAL RIVER, FL 34429MGRTERRY J. VONDERHAAR1564 SE PINWHEEL DRIVECRYSTAL RIVER, FL 34429MGRJOSHUA VONDERHAAR703 N. MCGOWAN AVENUECRYSTAL RIVER, FL 34429

(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**
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.TERRY J. VONDERHAAR

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)

16 AUG 12 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA