116000165756

(Requestor's Name)
(Address)
, ,
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Dusiness Faith Mars)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
· ——
Special Instructions to Filing Officer:
<u>'</u>

Office Use Only



700289369567

700289369567 08/29/16--01013--001 **125.00



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: At Panhandle Cleaners L.L.C. 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:
Courtney Hanson
Name of Person
At Panhandle Cleaners
Firm/Company
640 Holdon Circle
Address
Pensacold FL 32506 City/State and Zip Code hanson c 32@gmail.com
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
COUPTNEY HONSON at (385) 209-9485
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 Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Street Address

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

New Filing 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 C	ompany is:			
A+ Pan	handle C	edners	S L. L. C.	· · · · · · · · · · · · · · · · · · ·
ARTICLE II - Address: The mailing address and street address				
Principal C 640 Hilloyo Pensacola, Fi	Office Address: n (ifc)e - 32506		Mailing Ad	dress:
ARTICLE III - Registered Agent, (The Limited Liability Company car another business entity with an activ	nnot serve as its own Reve Florida registration.)	gistered Agent.		individual or
The name and the Florida street add	• •			
_	<u>Courtney</u>	Hanson		
	190 N. old	CORRY	Field Ad Apt	2504
	Florida street address (F	O. Box NOT	acceptable)	
	Pensacola	FL	32507 Zip	
_	City	State	Zip	
Having been named as registered age place designated in this certificate, I h further agree to comply with the provi am familiar with and accept the obligi	ereby accept the appoint isions of all statutes relat ations of my position as t	tment as registering to the properegistered agent	red agent and agree to a er and complete perform	ct in this capacity. I ance of my duties, and I
	(CONTINUED))	

Page 1 of 2

16 AUD 29 AM 9: 59
FALLAND TO THE TOTAL TO THE TOTAL THE

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

EQUIRED SIGNATURE: Signature of a member op 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. Filing Fees: Filing Fees: 30.00 Certified Copy (Optional)	Title:	
Jes attachment if necessary) V: Effective date, if other than the date of filing: (OPTIONAL) tive date is listed, the date must be specific and cannot be more than five business days prior to or 90 in this block does not meet the applicable statutory filing requirements, this date will not ent's effective date on the Department of State's records. VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a member op 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. Typed or printed name of signee Filing Fees: S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent		
Seattachment if necessary) V: Effective date, if other than the date of filing: (OPTIONAL) (OPTIONAL)		Hannah Kizer
Signature of a member op 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. **Typed ordering fees;** **Typed orderi		190 N. Old CORRYFIELD Rd Apt 250
Signature of a member op 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. **Typed ordering fees;** **Typed orderi		pensacola, FL 32507
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:		
V: Effective date, if other than the date of filing:	(Use attachment if necessary)	
Signature of a member op 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 of State constitutes a third degree felony as provided for in s.817.155, F.S. Filing Fees:		
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. Typed or printed name of signee Filing Fees: 31.00 Certified Copy (Ontional)	ctive date is listed, the date must be filling.) the date inserted in this block does	not meet the applicable statutory filing requirements, this date will not be
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. Typed or printed name of signee Filing Fees: 125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	ctive date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Department.	not meet the applicable statutory filing requirements, this date will not be
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. Typed or printed name of signee Filing Fees: 5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 530.00 Certified Conv (Ontional)	ctive date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Department's County of the provisions, if any.	not meet the applicable statutory filing requirements, this date will not be nent of State's records.
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. Typed or printed name of signee Filing Fees: 5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 530.00 Certified Conv (Ontional)	ctive date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Department's County of the provisions, if any.	not meet the applicable statutory filing requirements, this date will not be nent of State's records.
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. Typed or printed name of signee Filing Fees: 5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 30.00 Certified Conv (Ontional)	ctive date is listed, the date must be filing.) the date inserted in this block does nent's effective date on the Department's Other provisions, if any. REOUIRED SIGNATURE:	not meet the applicable statutory filing requirements, this date will not be ment of State's records.
Typed or printed name of signee Filing Fees: 125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 30.00 Certified Conv (Ontional)	ctive date is listed, the date must be filing.) the date inserted in this block does ment's effective date on the Department's Other provisions, if any. REOUIRED SIGNATURE: Signature of	not meet the applicable statutory filing requirements, this date will not be ment of State's records. a member or an authorized representative of a member.
Typed or printed name of signee Filing Fees: 125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 30.00 Certified Conv (Ontional)	ctive date is listed, the date must be filing.) the date inserted in this block does ment's effective date on the Department's effective date of the Departm	not meet the applicable statutory filing requirements, this date will not be ment of State's records. a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes.
Typed or printed name of signee Filing Fees: 125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 30.00 Certified Conv (Ontional)	ctive date is listed, the date must be filing.) the date inserted in this block does ment's effective date on the Department's effective date of the Departm	a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State
Filing Fees: Filing Fees: 125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 30.00 Certified Conv (Ontional)	ctive date is listed, the date must be filing.) the date inserted in this block does ment's effective date on the Department's effective date of the Departm	not meet the applicable statutory filing requirements, this date will not be ment of State's records. a member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State egree 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 Conv (Ontional)	ctive date is listed, the date must be filing.) the date inserted in this block does ment's effective date on the Department's effective date of the Departm	a member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.
125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	ctive date is listed, the date must be filing.) the date inserted in this block does ment's effective date on the Department's effective date of the Departm	a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.
\$ 30.00 Certified Copy (Ontional)	ctive date is listed, the date must be filing.) the date inserted in this block does ment's effective date on the Department's effective date of the Departm	a member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.
	ctive date is listed, the date must be filing.) the date inserted in this block does ment's effective date on the Department's effective date of the Departm	a member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S. Typed or printed name of signee
soo Cermicate of Status (Optional)	ctive date is listed, the date must be filing.) the date inserted in this block does ment's effective date on the Department's effective date of the Department's effective date on the Department's effective date of the Departm	not meet the applicable statutory filing requirements, this date will not be ment of State's records. a member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S. Typed or printed name of signee Filing Fees: f Organization and Designation of Registered Agent
and the second s	ctive date is listed, the date must be filing.) the date inserted in this block does ment's effective date on the Department's effective date of the Department's effective date on the Department's effective date of the Departm	a member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S. Typed or printed name of signee Filing Fees: f Organization and Designation of Registered Agent
ون ﷺ ت ات	sctive date is listed, the date must be filing.) the date inserted in this block does ment's effective date on the Department's effective date on the Depart	a member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S. Typed or printed name of signee Filing Fees: f Organization and Designation of Registered Agent