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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Bare Carpet Cleaning 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:

Irina Williams

Name of Person

Bare Carpet Cleaning LLC

Firm/Company

740 Brunello Dr

Address

Davenport FL 33897

City/State and Zip Code

info@barecarpetcleaning.net

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

For further information concerning this matter, please call:

Michael Williams at (407) 967-1291

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

Bare Carpet Cleaning, LLC.

ARTICLE II – Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

740 Brunello Drive
Davenport, Florida 33897

Mailing Address:

740 Brunello Drive
Davenport, Florida 33897

ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Irina Williams
740 Brunello Drive
Davenport, Florida 33897

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, F.S.



Registered Agent's Signature

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TALLAHASSEE, FLORIDA

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ARTICLE IV –

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

Title:

MGR

Name and Address:

Michael David Williams
740 Brunello Drive
Davenport, Florida 33897

MGR

Irina Williams
740 Brunello Drive
Davenport, Florida 33897

REQUIRED SIGNATURE:



Signature of a member or 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.C.

Irina Williams

Typed Name of Signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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