# 1700022634

(Requestor's Name)
(Address)
(Address)
, , ,
(City/State/Zip/Phone #)
(City/State/Zip/Fillotte #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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# FLORIDA DEPARTMENT OF STATE Division of Corporations

October 4, 2017

ERICA LORENA GONZALEZ LARA 1706 E COLLEGE AVE RUSKIN, FL 33570 US

SUBJECT: CRYSTAL CLEAN THE SOLUTION LLC

Ref. Number: W17000078698

We have received your document for CRYSTAL CLEAN THE SOLUTION 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 designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

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.

Carlos E Rico Regulatory Specialist II

Letter Number: 517A00020075

2017 OCT 30 Pili 4: 2

## COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: CRYSTAL CLEAN THE SOLUTION  Name of Limited Liability Company	ادرد
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
ERICALORENIA GONZALEZ LARA	
Name of Person  Firm/Company	
1706 E. COCLEGE. AUE.	
RUSKIN. FL. 33570 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	Ì
MI (WEL MON) Eat (813) 263 7845  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	
Mailing Address Street Address	<u>,</u>

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

The name of the Limited Liability (	Company is:			
CRYSTAL (Must contain	CLEAN the words "Limited Liab		50 W T (0V)	_1_
ARTICLE II - Address: The mailing address and street add	ress of the principal office	of the Limited Lia	ability Company is:	
<u>Principal</u>	Office Address:		Mailing Address:	
1706 E. LOC	LEGE AUT FL 33570		SANE	
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an act The name and the Florida street ad	annot serve as its own Reg (ive Florida registration.) dress of the registered age	istered Agent. You		
	Florida street address (P.	O. Box NOT acce	FOE.	
	City City	State	Zip	<u></u>
Having been named as registered ag place designated in this certificate. I further agree to comply with the prov am familiar with and accept the oblig	hereby accept the appointn visions of all statutes relative gations of proposition as re	nent as registered on ag to the proper an	ngent and agree to act in this c d complete performance of my poylard for in Chapter 605, F	apacity. 🏡 duties, and

(CONTINUED)

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EZICA LOCENA GONRALEZ LARA MIGGEL ANGEL MONDE SAYNAS
MIGGEL ANGEL MONDE SAYNAS
ng: <u>CA12+[1-1]</u> (OPTIONAL) and cannot be more than five business days prior to or 90 due applicable statutory filing requirements, this date will not be records.
•
or an authorized representative of a member.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)