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SECRETARY OF STATE
SECRETARY OF STATE

N CULLIGAN'
APR 1 1 2016

COVER LETTER

Division of Corporations						
SUBJECT: 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:						
Justin T. Spinler S MAURY R. Gardrer Name of Person						
C.J. Cleaning Services, L.L.C.						
4759 SE. 24th St. Address						
City/State and Zip Code City/State and Zip Code Character (Company) E-mail address:) to be used for future annual report notification)						
For further information concerning this matter, please call:						
Name of Person Area Code Daytime Telephone Number						
Enclosed is a check for the following amount:						
\$125.00 Filing Fee & Certificate of Status S155.00 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

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



March 30, 2018

JUSTIN T SPINLER 4759 SE 24TH STREET OCALA, FL 34471

SUBJECT: C & J CO, CLEANING SERVICES, L.L.C.

Ref. Number: W18000027525

We have received your document for C & J CO. CLEANING SERVICES, L.L.C. and your check(s) totaling \$160.00. 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 the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The name of the entity cannot include "CO." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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.

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

Letter Number: 518A00005700

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The name of the Limited Liability	COMPany is: Co Clean in the words "Limited Li	Cleaning Sentices	L. C.A.S.	L.L.C.	
ARTICLE II - Address: The mailing address and street ad	dress of the principal off	ice of the Limited Liabil	ity Company is:		
<u>Principa</u>	l Office Address:		Mailing Address:		
4759 SE Ocala, FL	34471				
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an ac	cannot serve as its own R	tegistered Agent. You m		SE SE	
The name and the Florida street a	ddress of the registered a	igent are:		Log Po	\neg
	MAURY	Rame	20NGR	R 11 ETARY HASSE	
	4759 St	(P.O. Box <u>NOT</u> acceptal	 ble)	PH 4: 59, OF STATE TE. FLORIO	Ö
	Or cdc City	FL . State	34471 Zip	Dri .	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" = Authorized Member HMRR (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 be applicable statutory filing requirements. the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. **REOUIRED 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.

Typed or printed name of signee

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)