

(Requestor's Name)	
(Address)	200338660032
(Address)	20000000002
(City/State/Zip/Phone #) PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	11/12/1901021008 ••12
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	SECRE I

Office Use Only

♦♦125.00

COVER LETTER

	ew Filing Section Division of Corporations	
CHI IE CO	CLC INTERIOR TRIM & MORE, LL	.c
SUBJECT		ited Liability Company
The enclos	sed Articles of Organization and fee(s) are	submitted for filing.
Please retu	um all correspondence concerning this mat	tter to the following:
	CHAD L CHAMBERLAIN	
		Name of Person
	CLC INTERIOR TRIM & MORE, LLC	
		Firm/Company
	75371 JOHNSON LAKE RD	
		Address
	YULEE, FL 32097	
	Ci CLCINTERIORTRIM@GMAIL.COM	ity/State and Zip Code
		for future annual report notification)
For further	information concerning this matter, please	call:
	HEATHER CHAMBERLAIN 91	
		rea Code Daytime Telephone Number
Enclosed i	is a check for the following amount:	
S125.00 F		\$155.00 Filing Fee & S160.00 Filing Fee. Certified Copy (additional copy is enclosed) 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 Liabil	ity Company is:		
CLC INTERIOR TRIM			
(Must cor	tain the words "Limited"	Liability Company, "I	L.C.," or "LI.C.")
ARTICLE II - Address:			
The mailing address and street	address of the principal o	ffice of the Limited Li	iability Company is:
-			
<u>Princi</u>	pal Office Address:		Mailing Address:
75371 JOHNSON LAK	E RD	75 37 1 J	OHNSON LAKE RD
YULEE, FL 32097		YULEE,	FL 32097
ARTICLE III - Registered As (The Limited Liability Compan another business entity with an The name and the Florida stree	y cannot serve as its own active Florida registratio	Registered Agent. Yo n.)	s Signature: ou must designate an individual or
	HEATHER A CHAMBER	LAIN	
		Name	
	75371 JOHNSON LAKE	RD	
	Florida street addres	s (P.O. Box NOT acc	eptable)
	YULEE	FLORIDA_	32097
	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..

(CONTINUED)

ZOIO NOV 12 MM II: 18
SECRETARY OF STATE

Title:		Name and Address:
"AMBR" = Au	thorized Member	
"MGR" = Mana	ager	
MGR	, _	CHAD L CHAMBERLAIN
		75371 JOHNSON LAKE RD
		YULEE, FLORIDA 32097
AMBR		HEATHER A CHAMBERLAIN
		75371 JOHNSON LAKE RD
		YULEE, JOHNSON
	·	
EV: Effective	it if necessary) date, if other than the date of	filing: 12/01/2019 (OPTIONAL)
EV: Effective ective date is list of filing.) I the date inserted ment's effective EVI: Other pro	date, if other than the date of sted, the date must be specied in this block does not meet date on the Department of evisions, if any.	fic and cannot be more than five business days prior to or 90 et the applicable statutory filing requirements, this date will not
EV: Effective ective date is list of filing.) I the date inserted ment's effective EVI: Other pro	date, if other than the date of sted, the date must be specied in this block does not meet date on the Department of	fic and cannot be more than five business days prior to or 90 et the applicable statutory filing requirements, this date will not
EV: Effective ective date is list of filing.) I the date inserted ment's effective EVI: Other pro	date, if other than the date of sted, the date must be specied in this block does not meet date on the Department of evisions, if any.	fic and cannot be more than five business days prior to or 90 et the applicable statutory filing requirements, this date will not
EV: Effective determined in the date inserted ment's effective EVI: Other pro	date, if other than the date of sted, the date must be specied in this block does not meet date on the Department of evisions, if any.	ific and cannot be more than five business days prior to or 90 et the applicable statutory filing requirements, this date will not State's records.
EV: Effective determined in the date inserted ment's effective EVI: Other pro	date, if other than the date of sted, the date must be specied in this block does not med date on the Department of evisions, if any. SIGNATURE: Signature of a mem This document is executed I am aware that any false in	ific and cannot be more than five business days prior to or 90 et the applicable statutory filing requirements, this date will not State's records.
EV: Effective ective date is list of filing.) If the date inserted inserted inserted in EVI: Other pro	date, if other than the date of sted, the date must be specied in this block does not med date on the Department of evisions, if any. SIGNATURE: Signature of a mem This document is executed I am aware that any false in	et the applicable statutory filing requirements, this date will not State's records. ber or an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State elony 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 Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-