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## **Articles of Organization Cover Letter**

## **David Reeder**

2804 Burton Place, Melbourne, FL, 32901

Daytime Number 321-209-0039

#### **COVER LETTER**

	lew Filing Sec Division of Cor					
SUBJECT	Croco CLe	ean LLC				
SUBJECT	· <del></del>	Name o	of Limited Lia	ability Company		
The enclos	sed Articles of	Organization and feet	s) are submi	tted for filing.		
Please retu	ım all correspo	ondence concerning th	is matter to t	he following:		
	David Reed	ler			70-7	21
			Nami	e of Person		F I
	Corco Clea	n			S. S	AR —
			Firm	/Company	7	_ 기 - 구
	2804 Burto	n Pl			·· - - -	PH L
			A	ddress	<del></del>	59
	Melbourne.	Florida, 32901				
	David@croc	ocleanwindows.com	-	e and Zip Code		<del></del>
	1	E-mail address: (to be	used for futu	re annual report notificat	ion)	<del></del>
For further i	information co	ncerning this matter, j	olease call:			
	David Reed		703	774-4521		
	Nam	ne of Person	Area Cod	e Daytime Telephor	ne Number	
Enclosed i	is a check for t	he following amount:				
	) Filing Fee	□\$130.00 Filing F Certificate of Statu	s Ce	\$155.00 Filing Fee & rtified Copy is enclosed)	□\$160.00 Filing Certificate of Sta Certified Copy (additional copy is	atus &
	New F Division P.O. B	ng Address illing Section on of Corporations lox 6327 assee, FL 32314		Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee eet, Suite 810	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Croco Clean LLC		HI LIB Comme	M 1 C 7 M 1 C 7)		
(Must o	conatin the words "Limited	Liability Company	, "L.L.C., "or "LLC.")		
ARTICLE II - Address: The mailing address and stre	et address of the principal	office of the Limite	d Liability Company is:		
<u>Pri</u> r	ncipal Office Address:		Mailing Address:		
2804 Burton Pi		280	2804 Burton Pl Melbourne, 32901		
Melbourne FI, 32901	1	Met			
The name and the Florida str	David Reeder	ed agent are:			
		Maine			
	2804 Burton PI Florida street addre	ess (P.O. Box <u>NOT</u>	acceptable)		
			32901		
	Melbourne	FI			
	Melbourne City	FI State	Zip		
lace designated in this certific urther agree to comply with th	City red agent and to accept ser cate, I hereby accept the ap he provisions of all statutes he obligations of my position	State vice of process for th pointment as registe relating to the prope	Zip ne above stated limited liability red agent and agree to act in the nr and complete performance of as provided for in Chapter 60.	his capacity. I f my duties, an	

#### ARTICLE IV-

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

Title:		Name and Address:
	Authorized Member	
"MGR" = N	lanager	
MGR	Į.	David Reeder
		2804 Burton P1
	<u> </u>	Melbourne, 32901
	<u>-</u>	<del></del>
	<del></del> -	
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		<u>.</u>
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	-	
	-	
n effective date i	ve date, if other than the date of fits listed, the date must be specific	ling: (OPTIONAL) c and cannot be more than five business days prior to or 90 days af
	erted in this block does not meet tive date on the Department of St	the applicable statutory filing requirements, this date will not be liste ate's records.
	provisions, if any.	
REQUIRE	<u>D</u> SIGNATURE:	
		er or an authorized representative of a member.
		n accordance with section 605.0203 (1) (b), Florida Statutes.
		ormation submitted in a document to the Department of State
	constitutes a third degree felo	ony as provided for in s.817.155, F.S.
	David Reeder	
	Ty	yped 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)