L20000093896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 MAR 30 AM 12:05
SECRETARY OF STATE
TALLAHASSEE, FL

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 17, 2020

CASEY CLOUCHETE
4741 HOPESPRING DR
ORLANDO, FL 32829

SUBJECT: CC LAW, PLLC
Ref. Number: W20000023176

We have received your document for CC LAW, PLLC and your check(s) totaling $. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific purpose of the entity must be set forth in the document.

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.

Keyna E Page
Regulatory Specialist II

Letter Number: 320A00005780

2020 MAR 30 AM 11:29

FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 3, 2020

CASEY CLOUCHETE
4741 HOPESPRING DR
ORLANDO, FL 32829

SUBJECT: CC LAW, PLLC
Ref. Number: W20000023176

We have received your document for CC LAW, PLLC 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 specific purpose of the entity must be set forth in the document.

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.

Keyna E Page
Regulatory Specialist II

Letter Number: 220A00004621

2020 MAR 13 AM 10:57

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: cc Law, PLLC
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:

Casey Clouchete
Name of Person

CC LAW, PPLC
Firm/Company

4741 Hopespring Dr
Address

Orlando, FL, 32829
City/State and Zip Code

casey.clouchete@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Casey Clouchete at (407) 235-0427
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

CC Law, PLLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	**Mailing Address:**
4741 Hopespring Dr, Orlando, FL, 32829	4741 Hopespring Dr, Orlando, FL, 32829

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Casey Clouchete
Name

4741 Hopespring Dr
Florida street address (P.O. Box **NOT** acceptable)

Orlando	FL	32829
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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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2020 MAR 30 AM 12:06
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TALLAHASSEE, FL

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 "MGR" = Manager	
MGR /AMBR	Casey Clouchete 4741 Hopespring Dr, Orlando, FL, 32829

(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 not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any:
To practice Law, advising clients, representing them in Court.

REQUIRED 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.

Casey Clouchete
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)

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2020 MAR 30 AM 12:05