L210002391

(Requestor's Name)
(Adaress)
(Address)
(City/State/Zip/Phone #)
PICE DE WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

Office Use Only



600366655076

05/20/21--01001--007 **160.00

WIRAY 19 PH 3: 25
2021 MAY 19 PM 3: 15 ITALI
ALLAHASSEE, FLOR



COVER LETTER

COVIDING CONTROL CONTR	
TO: New Filing Section Division of Corporations	
SUBJECT: Carey's Cleaners, LLC 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:	
Tr M. Carey Name of Person	
Carey's Cleaners UC	
548 Spring Creek Highway	:
Crawford Ville, F1 32327	i C
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Tr Carey at (229) 376-5316 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount: [S125 00 Filing Fee S130.00 Filing Fee & Certified Copy (additional copy is enclosed) [S125 00 Filing Fee & 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 1 - Name: The name of the Limited Liability Company is:
Carey's Cleaners, LLC. (Must contain the Jords "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:
Crawfordville F1 32327 Crawfordville, F1 32327
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: Tr Corey Name
548 Spring Creek Highway Florida street address (P.O. Box NOT acceptable)
Crawbordville, F1 32327 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. Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statites 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
Carly (RED)
(CONTINUED)
က က က က က က က က က က က က က က က က က က က

ARTICLE IV- The name and address of each person auth	norized to manage and control the Limited Liability Con	npany:		
Title;	Name and Address:			
"AMER" = Authorized Member "MGR" = Manager MGR / POOR	Tr Carey 5-18 Spring Greek Hohuay Craw Bordville, F1383271		-	
			_ _ _	
			. <u> </u>	
			_	
			<u>-</u>	
(Use attachment if necessary) ARTICLE V: Effective date, if other than the dat (If an effective date is listed, the date must be s the date of filing.) Note: If the date inserted in this block does not the document's effective date on the Department.	te of filing: \(\frac{\text{OPTIO}}{pecific and cannot be more than five business days promeet the applicable statutory filing requirements, this can of State's records.	NAL) ior to or ! late will t	90 days	s after isted a
ARTICLE VI: Other provisions, if any.				_
				
This document is exe	member or an authorized representative of a member reuted in accordance with section 605.0203 (1) (b). Flor alse information submitted in a document to the Departreprese felony as provided for in s.817.155, F.S. Typed or printed name of eignee		test in the second seco	
\$125.00 Filing Fee for Articles of \$-30.00 Certified Copy (Optiona \$-5.00 Certificate of Status (Op	Filing Fees: Organization and Designation of Registered Agent l) tional)		가 3: 25	[]