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	New Filing Secti Division of Corp				
are tec		LEAN AUTO SPA LL	.C		
SUBJEC	, t :	Name of I	imited Liabili	ty Company	·····
The encl	osed Articles of C	Organization and fee(s)	are submitted	for filing.	
Please re	tum all correspon	ndence concerning this	matter to the f	ollowing:	
	DENNY GRE	EEN			
			Name of	Person	
	XTREME CI	EAN AUTO SPA LLO	2		
			Firm/Co	пірапу	
	2108 KVILL	E RD			
			Addr	ess	
	AUBURNDA	ALE FL 33823			
	DINARY IN	TACTUS CONTAIL CO	City/State an	d Zip Code	
		EN2719@GMAIL.CO		numual report notificati	on)
For furthe	er information co	ncerning this matter, pl	case call:		
	DENNY GRI	EEN	863	585-7295	
	Nam	e of Person	Area Code	Daytime Telephon	e Number
Enclose	d is a check for t	he following amount:			
	.00 Filing Fee	[]\$130.00 Filing Fe Certificate of Status	Certif	55.00 Filing Fee & fied Copy and copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Division P.O. E	ng Address Thing Section on of Corporations dox 6327 hassee, FL 32314		Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assec ret, Suite 810

The name of the Limited Liability Company is:

ARTICLE 1 - Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must cor	tain the words "Limited Lia	bility Company, "	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street	address of the principal offic	e of the Limited 1	Liability Company is:	
Princi	pal Office Address:		Mailing Address:	
2108 KVILLE RD		2108	K VILLE RD	
AUBURNDALE, F	1 33823	AUB	URNDALE, FL 33823	
		-		· · · · · · · · · · · · · · · · · · ·
ARTICLE III - Registered A	gent, Registered Office, & sy cannot serve as its own Re	Registered Agen	t's Signature: 'ou must designate an individu	2023 SECO
The Limited Liability Compar	iy cannot serve as its own Re	egistered Agent. Y	t's Signature; 'ou must designate an individu	2023 AP
The Limited Liability Compar nother business entity with ar	ny cannot serve as its own Re active Florida registration.	egistered Agent. Y	t's Signature: 'ou must designate an individu	2023 APR 13
The Limited Liability Compar nother business entity with ar	ny cannot serve as its own Re active Florida registration.	egistered Agent. Y	t's Signature: 'ou must designate an individu	- ω ;
The Limited Liability Compar nother business entity with ar	y cannot serve as its own Re active Florida registration. t address of the registered as DENNY GREEN	egistered Agent. Y	t's Signature: 'ou must designate an individu	
The Limited Liability Compar nother business entity with ar	y cannot serve as its own Re active Florida registration. t address of the registered as DENNY GREEN	egistered Agent. Y) gent are:	t's Signature: 'ou must designate an individu	- ω ;
The Limited Liability Compar nother business entity with ar	y cannot serve as its own Re active Florida registration. t address of the registered as DENNY GREEN	egistered Agent. Y) gent are: Name	ou must designate an individu	- ω ;
ARTICLE III - Registered A The Limited Liability Compar nother business entity with ar The name and the Florida stree	y cannot serve as its own Relative Florida registration. t address of the registered as DENNY GREEN 2719 AVENUE O NW	egistered Agent. Y) gent are: Name	ou must designate an individu	13 PH 4:4

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..

Registere (REQUIRED)

(CONTINUED)

• . . .

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	DENNY GREEN 2719 AVENUE O NW
	WINTER HAVEN, FL. 33881
MGR	TENESIA HAWTHORNE
	2888 HAVENDALE BLVD WINTER HAVEN, FL 33881

effective date is listed, the date must be of filing.) If the date inserted in this block do	the date of filing: (04102023 (OPTIONAL) t be specific and cannot be more than five business days prior to or 90 da es not meet the applicable statutory filing requirements, this date will not be
TLE V: Effective date, if other than to affective date is listed, the date mus	the date of filing: (04102023 (OPTIONAL) t be specific and cannot be more than five business days prior to or 90 da es not meet the applicable statutory filing requirements, this date will not be
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T.E.V: Effective date, if other than the ffective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department.	the date of filing: (04102023 (OPTIONAL) t be specific and cannot be more than five business days prior to or 90 da es not meet the applicable statutory filing requirements, this date will not be
CLE V: Effective date, if other than to effective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department's Other provisions, if any. REQUIRED SIGNATURE:	the date of filing: 04102023 (OPTIONAL) the specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be rement of State's records.
CLE V: Effective date, if other than to a fective date is listed, the date must be of filing.) If the date inserted in this block document's effective date on the Department's effective date on the Department's fany. REQUIRED SIGNATURE: Signature This document is Lam aware that a	the date of filing: (04102023 (OPTIONAL) t be specific and cannot be more than five business days prior to or 90 da es not meet the applicable statutory filing requirements, this date will not be
T.E.V: Effective date, if other than teffective date is listed, the date muste of filing.) If the date inserted in this block document's effective date on the Department's effective date on	the date of filing: (04102023 (OPTIONAL) t be specific and cannot be more than five business days prior to or 90 day es not meet the applicable statutory filing requirements, this date will not be rement of State's records. The premier or an authorized representative of a member. Sexecuted in accordance with section 605.0203 (1) (b). Florida Statutes, my false information submitted in a document to the Department of State diegree felony as provided for in s.817.155, F.S.