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EXAMINER

SECRETARY OF STATE
BIVISION OF CORPORATIONS
10 JAN - 7 AM DE 19

COVER LETTER

Division of Corporations
SUBJECT X-Tea Clean // C.
SUBJECT: X-TRA Clean, LLC Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certic Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in F
Please return all correspondence concerning this matter to the following:
Linda A. Rahren Name of Person
Name of Person
Associated Business Services Firm/Company
Firm/Company
21491 Alabama Hwy 55
Address
Andalusia, AL 36420 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Linda A Rabken at (334) 223-3087 Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \times \\$130.00 Filing Fee & \times \\$155.00 Filing Fee & \times \\$160.00 Filing Fee, Certificate Copy \text{Certified Copy}

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIG LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1. X-TRA Clean, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writte consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C," "LLC.")
2. Alabara (Jurisdiction under the law of which foreign limited liability company is organized) 3. 26-2305295 (FEI number, if applicable)
4. 4-1-08 (Date of Organization) 5. Per DetuA (Duration: Year limited liability company with cease of exist or "perpetual")
6. 1-1-2010 (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 404 River Falls 5t. 5
Andalusia, AL 36420 (Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
Justin Sightler; 404 River FAlls St., Andalusia, AL 36420
Ryan Jackson; Co. Rd 45; Florala, AL 36442
- J.
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
Janitorial Services
LAN I
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
Tustin Sightler Typed or printed name of signee
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: X-TRA Clean, LLC
If unavailable, the alternate to be used in the state of Florida is:
2. The name and the Florida street address of the registered agent and office are:
Luke Smith (Name)
H502 HWY 20 East Svife A Florida Street Address (P.O. Box NOT ACCEPTABLE)
Niceville FL 32578 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 registe

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 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Beth Chapman Secretary of State P.O. Box 5616 Montgomery, AL 36103-5616

STATE OF ALABAMA

I, Beth Chapman, Secretary of State of the State of Alabama, having custody of the Great and Principal Seal of said State, do hereby certify that

the domestic corporate records on file in this office disclose that X-Tra Clean, LLC organized in the office of the Judge of Probate of Covington County on April 1, 2008. I further certify that the records do not disclose that said X-Tra Clean, LLC has been dissolved.



In Testimony Whereof, I have hereunto set my hand and affixed the Great Seal of the State, at the Capitol, in the City of Montgomery, on this day.

December 18, 2009

Date

Beth Chapman

Beth Chapman

Secretary of State