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(Re	questor's	Name)
511 : Lake	Worth, I	ast Coast St. FL 33460
(City	y/State/Zi	p/Phone #)
PICK-UP	□w	AIT MAIL
(Bu	siness En	itity Name)
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SECRETANY OF STATE
TALLAHASCEE, FLORIDA

ARTICLES OF ORGANIZATION FOR CRIS, L.L.C.

Article I

Name

The name of the Limited Liability Company is:

CRIS, L.L.C.

Article II

Address

The mailing address and street address of the principal office of the Liability Company is:

511 South East Coast Street, Lake Worth, FL 33460, 561-547-

AND ANY OF STATE ANASSEE FLORIDA

Article III

Registered Agent, Registered Office and Registered Agent's Signature

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

Joseph Crisafulle

511 South East Coast Street Lake Worth, FL 33460

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 provision 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, F.S.

oseph Crisafalle, Registered Agent

IN WITNESS WHEREOF, the undersigned subscriber has executed these articles of organization on the <u>22</u> day of March 2003.

Joseph Crisafylle

STATE OF FLORIDA

COUNTY OF PALM BEACH

Before me, a Notary Public authorized to take acknowledgements in the State and County set forth above, personally appeared Joseph Crisafulle, know to me and known by me to be the person who executed the foregoing articles of organization, and he acknowledged before me that he executed those articles of organization.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 22 day of march, 2003.

OFFICIAL NOTARY SEAL
JOAN L GUY
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. DD062260
MY COMMISSION EXP. OCT. 2,2005

Notary Public