

LO7000067954

(Requestor's Name)

(Address)

(Address)

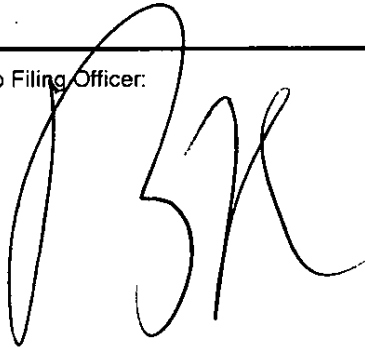
(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

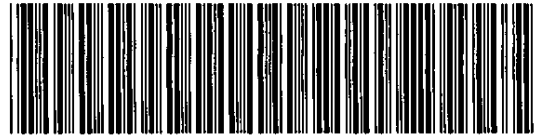
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:  


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RECEIVED  
07 JUN 28 PM 4:16  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
07 JUN 28 AM 8:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



UCC FILING & SEARCH SERVICES, INC.  
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07 JUN 28 2008  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
**FILED**  
 11:37 AM '08

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

Crummeyservice.com, LLC

**Filing Evidence**

- Plain/Confirmation Copy
- Certified Copy

**Retrieval Request**

- Photocopy
- Certified Copy

**Type of Document**

- Certificate of Status
- Certificate of Good Standing
- Articles Only
- All Charter Documents to Include Articles & Amendments
- Fictitious Name Certificate
- Other

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

FILED  
07 JUN 28 AM 8:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE 1

Name

The name of the Limited Liability Company is: **CRUMMEYSERVICE.COM, LLC**

ARTICLE 2

Address

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

**Principal Office Address:**

c/o Peck Financial  
950 Peninsula Corporate Circle  
Suite 2010  
Boca Raton, FL 33487

**Mailing Address:**

c/o Peck Financial  
950 Peninsula Corporate Circle  
Suite 2010  
Boca Raton, FL 33487

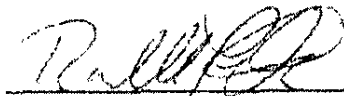
ARTICLE 3

**Registered Agent, Registered Office & Registered Agent's Signature**

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

Randall W. Peck  
355 South Silver Palm Rd.  
Boca Raton, FL 33432

*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.*

  
\_\_\_\_\_  
Randall W. Peck

**ARTICLE 4**

**Manager(s) or Managing Member(s)**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

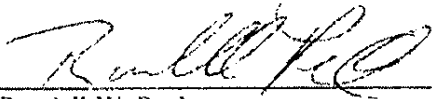
MGR

Randall W. Peck  
355 South Silver Palm Rd.  
Boca Raton, FL 33432

MGR

Mitchell Pierce  
1830 S. Ocean Drive  
Hallandale, FL 33009

**REQUIRED SIGNATURE:**



\_\_\_\_\_  
Randall W. Peck

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)