## #/ 12000070046

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
, (Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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> K.SALY EXAMINER MAY 24 2012

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: C-To-R LLC	
	ed Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Ehab Elshiwiakh	
	Name of Person
	Firm/Company
8931 Pensacola Blvd	·
	Address
Pensacola, FL 32534	· ·
' . Cit	y/State and Zip Code
miasmail@earthlink.net	
E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, please	e call:
Mia Fiterman	at ( 205 533-9300
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee & Certificate of Status	Certified Copy  (additional copy is enclosed)  \$160.00 Filing Fee,  Certificate of Status &  Certified Copy  (additional copy is enclosed)
Mailing Address	Street/Courier Address

*‡*3

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

AKTICLES OF ORGANIZATION	PORTLONIDA LIMITED LIMBILITA COMPANIA
ARTICLE I - Name: The name of the Limited Liability Com	ıpany is:
C-To- R Wholesale LLC	
(Must and with the words "Lin	mited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address  Principal Office Address:	of the principal office of the Limited Liability Company is  Mailing Address:
8931 Pensacola Blvd	8931 Pensacola Blvd
Pensacola, FL 32534	Pensacola, FL 32534
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as its business entity with an active Florida registration.	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another

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

Ehab Elshiwiakh Name 8931 Pensacola Blvd

Florida street address (P.O. Box NOT acceptable)

FL 32534 City, State, and Zip Pensacola

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, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

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

MGR	Ehab Elshiwiakh
	8931 Pensacola Blvd
	Pensacola, FL 32534
<del></del>	
(Use attachment if necessary)	
• ,	_
LEV: Effective date, if other than	the date of filing: (OPTION)
fective date is listed, the date mu	ist be specific and cannot be more than five business da

Signature of a member or an authorized representative of a member.

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

## Ehab Elshiwiakh

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)