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PICK-UP	☐ WAIT	MAIL.
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Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

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G. MCLEOD

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**EXAMINER** 



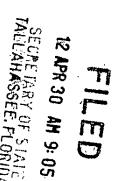
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DEFINITION OF CORPORATIONS
OF CORPORATIONS

RECEIVED



## **COVER LETTER**

	ation Section 1 of Corporations		***
SUBJECT:	C. Kressler LLC Name of Limited	Liability Company	
The enclosed Art	icles of Organization and fee(s) are sul	bmitted for filing.	
Please return all o	correspondence concerning this matter		·
·	Charles Alford Kressky	TT fame of Person	
	C. Ikressle		
	1131 Fernwood rood	Address	
	Tallahassee, FL, 323 City/s Charles Kressler & Yaha E-mail address: (to be used for	64/ State and Zip Code	
	Charles. Kressler & Yoha E-mail address: (to be used for	future annual report notification)	
For further inform	nation concerning this matter, please c	all:	
Cha	rles Kressler II	at ( <u><b>\$50</b></u> ) <u><b>210 - 8381</b></u> Area Code & Daytime Telepho	ne Number
Enclosed is a ch	neck for the following amount:		
\$125.00 Filing F	ee \$\int_\$130.00 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 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 Circ Tallahassee, FL 32301	le

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
C. Kressler L.L.C. (Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1131 Fernwood road Tallahasser. FL 32304	1131 Fernwood rond Tallahassec, FL 32304
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the r	tered Agent. You must designate an individual or another
Charles Kressle	ALL
	fress (P.O. Box <u>NOT</u> acceptable)
	FL 3230'1 FC 32 10 10 10 10 10 10 10 10 10 10 10 10 10
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited his certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S
Registered Agent's Signat	fure (REQUIRED)

(CONTINUED)

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

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

'MGR" = Manager 'MGRM" = Managing I	
	Member
400	
MGRM	Charles Kresslar I
	1131 Fernishood road
	Tallohassee, FL. 32304
·····	
•	
•	
Use attachment if nece	
EV: Effective date, if	other than the date of filing: (OPTION e date must be specific and cannot be more than five business dailing.)
EV: Effective date, if ective date, if ective date is listed, the days after the date of fine the date.	other than the date of filing: (OPTION e date must be specific and cannot be more than five business datiling.)  URE:
EV: Effective date, if ective date, if ective date is listed, the days after the date of fine the date.	other than the date of filing: (OPTION e date must be specific and cannot be more than five business dailing.)  URE:
LE V: Effective date, if ective date is listed, the days after the date of final states after	other than the date of filing: (OPTION e date must be specific and cannot be more than five business datiling.)  URE:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)