# L0/00006247

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# LIMITED LIABILITY COMPANY

Croes Investments, LLC

Certificate of Status	1
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Estimated Charge	\$160.00

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# **ARTICLES OF ORGANIZATION**

OF

# **CROES INVESTMENTS, LLC**

The undersigned hereby present(s) these Articles of Organization for the formation of a Limited Liability Company pursuant to the Florida Limited Liability Company Act.

# **ARTICLE I**

NAME

The name of the Limited Liability Company is Croes Investments, LLC.

# **ARTICLE II**

# PRINCIPAL OFFICE

The mailing address and street address of the Limited Liability Company is 901 Avon Avenue, Lakeland, Florida 33801-5801.

#### ARTICLE III

#### **DURATION**

The Limited Liability Company shall have perpetual existence, commencing on the date of the execution and acknowledgment of these Articles of Organization.

#### ARTICLE IV

#### **PURPOSE**

The Limited Liability Company is organized for the purpose of transacting any and all lawful business.

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#### **ARTICLE V**

# **MANAGEMENT**

The Limited Liability Company is to be a member-managed company.

## **ARTICLE VI**

# INITIAL REGISTERED OFFICE AND INITIAL REGISTERED AGENT

The street address of the initial registered office of the Limited Liability Company is 901 Avon Avenue, Lakeland, Florida 33801-5801 and the name of the initial registered agent of the Limited Liability Company at that office is Peter C. Croes.

# **ARTICLE VII**

#### · INDEMN!FICATION

Except to the extent otherwise provided in the Operating Agreement of the Limited Liability Company, the Limited Liability Company shall indemnify each person or entity who can was or is a Member, director, officer, employee or agent of the Limited Liability Company to the full extent permitted by law.

David D. Hallock, Jr.

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## STATE OF FLORIDA COUNTY OF POLK

The foregoing Articles Of Organization were acknowledged before me this <u>33.00</u> day of April, 2001, by David D. Hallock, Jr. as an authorized representative of a Member of the Limited Liability Company, who is personally known to me.

Official Seal
SHARMAN BARE
Notary Public, State of Florida
My comm. expires May 18, 2004
Comm. No. CC937825

(AFFIX NOTARY SEAL)

NOTARY PUBLIC, State of Florida at Large

SHORMAN BARS
(Printed Name)

My commission expires:

My commission number:

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SECILLIANS SEE, FLORIDA

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# CERTIFICATE OF DESIGNATION

OF

# REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 AND SECTION 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA:

- The name of the Limited Liability Company is: Croes Investments, LLC. 1.
- The name and street address of its initial registered agent and initial 2. registered office are:

Peter C. Croes 901 Avon Avenue Lakeland, Florida 33801-5801

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.

Y- 23- 2001