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## TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: (Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Domald Craid
(Name of Person)

Craig LC
(Firm/Company)

41092 Schwinn Dr
(Address)

Lake Wales F1 33859

For further information concerning this matter, please call:

Donaldor Elizabeth, 863, 439-45210r 863-678-4296
(Name of Person) Craig (Area Code & Daytizze Telephone Number)

STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 ARTICI E I. Nama-

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Craig Limited ARTICLE H-Address:	Liability Co.  nacipal office of the Limited Liability Company is:
the manife socies and street and err or are han	hapen byttes of the Latinion Lawring Congress, in.
Principal Office Address:	Mailing Address:
4692 Schwinn Dr	4692 Schwinn Dr
Lake Wale FI	Lake Wales F1
33859	33859
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re  Donald Consumer Agent, Registered  Name  Hopa School Florida street address (P.O.	Personal agent are:
City, State, ar	S FLORIDA 33859

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..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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

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

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	_
mg-R_	Donald Cray g 4692 Schwinn Lake Wales F133859
400 0 00	The ball Come
TNG RM	HG9 & Schwinn Lake Wales Fl 33859
(Use attachment if necessary)	
NOTE: An additional article must b	e added if an effective date is requested.
REQUIRED SIGNATURE:	
Larold	authorized representative of a member.
(In accordance with section 60: of this document constitutes an that the facts stated herein are t	8.408(3), Florida Statutes, the execution affirmation under the penalties of perjury rege.)
Donald	<u>craig</u>
Typed or p	ripled name of signife

Filing Fres:
\$199.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)