

L04000047399

(Requestor's Name)

Brian J Croxford LLC  
6260 Whispering Lane  
Titusville, FL 32780

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

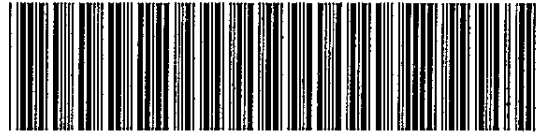
(Document Number)

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TALLAHASSEE, FLORIDA

**LABOR**

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**FINDERS®**

CONTRACT STAFFING

Personnel

KISSIMMEE, FL  
(407) 935-9959

ORLANDO, FL  
(407) 843-5050

ATT.

Please note that there  
was a typographical error on my  
address. Street # is 6260

6/20/04

Brian Huff

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SECRETARY U. STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Brian J Croxford LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

5260 Whispering Lane

Titusville, FL 32780

**Mailing Address:**

5260 Whispering Lane

Titusville, FL 32780

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

Brian J Croxford

Name

5260 Whispering Lane

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

Titusville

FLORIDA 32780

City, State, and Zip

*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..*

X 

Registered Agent's Signature

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**ARTICLE IV- 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:**

MGRM

Brian J Croxford

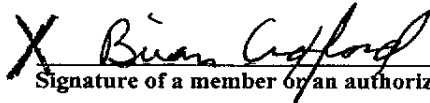
5260 Whispering Lane

Titusville, FL 32780

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**


**REQUIRED SIGNATURE:**



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.)

Brian J Croxford



Typed or printed name of signee

**Filing Fees:**

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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TALLAHASSEE, FLORIDA

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