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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: CR Homes LLC (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:		
Roger Treat (Name of Person)		
CR Homes LLC		
(Firm/Company)		
409 Orange St. (Address)		
Auburndale Florida 33823 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Roger Trent at (815) 492 - 1329 (Name of Person) (Area Code & Daytime 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

ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF	OR TEST TO
ARTICLE I - Name: The name of the Limited Liability Company is:	
CR Hones LLC	OR OR OF THE PERSON OF THE PER
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
409 Grange St.	409 Orange St.
Auburndale Florida	Auburndale, FLorida
33823	33823
ARTICLE III - Registered Agent, Registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The name and the Florida street address of the registered Control The Name and the Florida street address of the registered Control The Name and the Florida street address of the registered Control The Name and the Policies and The Name and	

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

Auburndale FLORIDA 33823 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..

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managi	ing Member(s):
The name and address of each Manager	
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Roger Trent 409 Orange St. Aubundale Florida 33823
MGRM	Convie Trent 409 orange St. Auburndale, Florida 33823
······································	
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
ρ_{sa}	11007
Signature of a member or an a	uthorized representative of a member.
	.408(3), Florida Statutes, the execution affirmation under the penalties of perjury ue.)
<u>Koger</u>	Trent
Ulyped or pri	inted 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)