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# LIMITED LIABILITY COMPANY

### **David Cron Sales LLC**

Certificate of Status	0
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# ARTICLES OF ORGANIZATION **OF** David Cron Sales LLC

## ARTICLE I

NAME

The name of the limited liability company shall be: David Cron Sales LLC

### ARTICLE II

PRINCIPAL OFFICE

TALLANDER STEPHONES The principal place of business and mailing address of this Limited Liability Company shall be: 1625 Red Cedar Dr., Apt 4D, Ft Myers, Florida 33907.

#### ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 660 East Jefferson Street, Tallahassee, Florida 32301. Located in the County of Leon.

#### DURATION ARTICLE IV

The duration for the limited liability company shall be: 12/31/2044.

### ARTICLE V MANAGERS/MEMBERS:

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

David Cron, 1625 Red Cedar Dr., Apt 4D, Ft Myers, Florida 33907 Partcia Cron, 1625 Red Cedar Dr., Apt 4D, Ft Myers, Florida 33907

Business Filings Incorporated, Organizer

Mark Schiff, AVP

Authorized Representative

Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr. Suite 200,

Madison, WI 53717

(608) 827-5300

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

And Solling So PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTE THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: David Cron Sales LLC

The name and address of the registered agent and office is Business Filings Incorporated, 660 East Jefferson Street, Tallahassee, Florida 32301. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

Mark Schiff, AVP

**Business Filings Incorporated** 

Date: October 29, 2004