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(Red	questor's Name)
(Add	dress)
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(City	//State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Bus	siness Entity Name)
(Doc	cument Number)
Certified Copies	Certificates of Status
Special Instructions to F	iling Officer:
V	Office Use Only



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05 MAY 31 PM 2: 12 SECREL: RY CT STATE ALLAHASSEE, FLORIDA



CAPITAL'CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

CRF Magnolia Point	OS MAY 3
	SSEE F SOLUTION
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by 5/2]	UCC 1 or 3 File
Name Date Time	UCC 11 Search
	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

OS THE CONTRACTOR	~ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
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The name of the Limited Liability Company is:

CRF - MAGNOLIA POINT, LLC

ARTICLE II - Address:

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

Principal Office Address: 500 South Florida Avenue, Suite 700 Lakeland, FL 33801 Mailing Address: 500 South Florida Avenue, Suite 700 Lakeland, FL 33801

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Peter A. McFarlane
Name
PETER A. McFARLANE, P.A.
500 South Florida Avenue, Suite 715
Florida street address (P.O. Box NOT acceptable)

Lakeland FLORIDA 33801
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..

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:

<u>Title:</u> "MGR" = Manage "MGRM" = Manage		Name and Address:	en e
MGR			Corporation of Fla Avenue, Suite 700 33801
	_		
	···		
(Use attachment i	if necessary)		
NOTE: An add	itional article must be	added if an effective	date is requested.
REQUIRED SIG	GNATURE:		
	Wille O'll	/	
	Signature of a member o	r an authorized represent	ative of a member.
		n 608.408(3), Florida Statu es an affirmation under the in are true.)	
	William D. Drost. Typed	Vice President of or printed name of signee	Manager

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	TO THE STATE OF TH
CRF - MAGNOLIA POINT, L	LC
ARTICLE II - Address: The mailing address and street address of the princi	pal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
500 South Florida Avenue, Suite 700	500 South Florida Avenue, Suite 700
Lakeland, FL 33801	Lakeland, FL 33801

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Peter A. McFarlane

Name

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500 South Florida Avenue, Suite 715

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

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City, State, and Zip

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Page 1 of 2 (CONTINUED)

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MGR	_		Corporation of Fla Avenue, Suite 700 33801
	<u> </u>		
y			
(Use attachment i	• •		
NOTE: An addi	tional article must be	added if an effective	date is requested.
	Wille Ofte	<i>y</i>	·
	(In accordance with section of this document constitute that the facts stated herei	n 608.408(3), Florida Statut es an affirmation under the	tes, the execution
	William D. Drost. Typed	Vice President of or printed name of signee	Manager

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