

LO6000019342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

N. Culligan FEB 22 2006

**Law Office of  
Jamie B. Greusel, Esquire**

1104 North Collier Boulevard  
Marco Island, FL 34145  
239-394-8111

Jamie B. Greusel  
Licensed in FL and NJ

February 14, 2006

State of Florida  
Department of State  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

Re: CCRR Enterprises, LLC

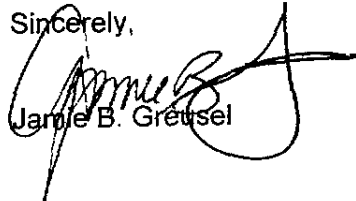
Gentlemen/Ladies:

Enclosed please find:

1. Duplicates of the Articles of Organization for CCRR Enterprises, LLC
2. Check in the amount of \$155.00 for the filing fee and certified copy

Kindly file.

Sincerely,

  
Jamie B. Greusel

JBG/rs  
Enclosure

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

CCRR Enterprises, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

### ARTICLE II - Address:

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

#### Principal Office Address:

587 Van Emburgh Ave.  
Washington Township, NJ 07676

#### Mailing Address:

587 Van Emburgh Ave.  
Washington Township, NJ 07676

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Jamie B. Greusel

Name

1104 N. Collier Blvd.

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

Marco Island FL 34145

City, State, and Zip

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*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, F.S..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

**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

Raquel G. Hernandez

587 Van Emburgh Ave.

Washington Township, NJ 07676

MGRM

Rafael J. Fraguela

587 Van Emburgh Ave.

Washington Township, NJ 07676

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_, (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

Rafael J. Fraguela

Typed or printed name of signee

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06 FEB 20 AM 11:43  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

**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)