

LO6 0000 29546

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

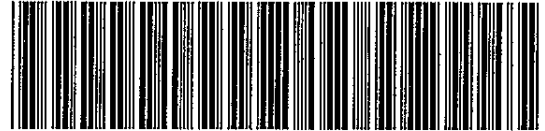
(Business Entity Name)

(Document Number)

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LO6-29546
OR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Valrico - Crosby, 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:

Geoffrey Weber
(Name of Person)

(Firm/Company)

221 Turner St.
(Address)

CLEARWATER, FL 33756
(City/State and Zip Code)

For further information concerning this matter, please call:

Geoffrey Weber at (727) 449-1476
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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**ARTICLES of ORGANIZATION FOR
VALRICO-CROSBY, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

VALRICO-CROSBY, LLC

ARTICLE II- Address:

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

221 Turner Street
Clearwater, Florida 33756

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

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

Geoffrey C. Weber
221 Turner Street
Clearwater, FL 33756

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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

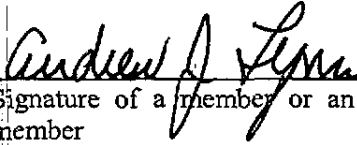
ARTICLE IV- Duration:

The Limited Liability Company shall exist until dissolved in a manner provided by law or as provided in the Operating Agreement adopted by the members.

ARTICLE V - Management

The Limited Liability Company is to be managed its Members and the address of the managing member is:

Andrew J. Lynn
221 Turner Street
Clearwater, FL 33756



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.)

Andrew J. Lynn

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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