L06000089276

A.	
(Requestor's Name)	
(Address)	_
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	٦
•	
	╝

Office Use Only



700079558787

09/11/06--01032--016 **130.00

OG SEP II AMII: 47
SECRETAGO OF STATE

LAW OFFICES OF

Chester G. McLeod

Chester G. McLeod, Esq. Attorney at Law 269 N. University Drive, Suite E Pembroke Pines, FL 33024 Telephone: (954) 272-0100 Facsimile: (954) 272-0336

September 6, 2006

TO: Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: Crane's Diversified Unlimited Investment, LLC.

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Chester G. McLeod, Esq. 269 N. University Drive, Suite E Pembroke Pines, FL 33024

For further information concerning this matter, please call: Chester G. McLeod, Esq., at (954) 272-0100

Enclosed is a check for the following amount:

0 \$125.00 Filing Fee \$\infty\$\$130.00 Filing Fee & 0 \$155.00 Filing Fee & 0 \$160.00 Filing Fee,

Certificate of Status

Certified Copy

Certificate of Status &

(additional copy is enclosed) Certified Copy

(additional copy is enclosed)

Thank you for your time and consideration.

Respectfully yours,

Chester McLeod. Esa

CGM/jm Cc: client

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I Name:

The name of the Limited Liability Company is: Crane's Diversified Unlimited Investment, LLC.

ARTICLE II- Address:

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

Principal Office Address: 5565 NW 194th Lane Opa Locka, FL 33055 <u>Mailing Address</u>: 5565 NW 194th Lane Opa Locka, FL 33055

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

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

Chester G. Mcleod, Esq. 269 N. University Dr., Ste E Pembroke Pines, FL 33024

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 Chester G. McLeod, Esq.

(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:

Name and Address:

"MGR" - Manager

John A. Crane Sr. 5565 NW 194th Lane Opa Locka, FL 33055

"MGRM" - Managing Member

Agnes Crane

13801 NW 4th St. Bldg 5105 Pembroke Pines, FL 33028

MGRM.

Eunice Crane

5565 NW 194th Lane Opa Locka, FL 33055

MGRM

Betty Holland

5565 NW 194th Lane Opa Locka, FL 33055

MGRM

Sandra Stewart 5565 NW 194th Lane Opa Locka, FL 33055

ARTICLE V: Effective date, if other than the date of filing: None

REQUIRED SIGNATURE:

Signature of a member of 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.)

Agnes Crane

Typed or printed name of signee

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)

16 SEP 11 AMII: 47
ECRETARY OF STATE