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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne),
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to F	Filing Officer:	
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SECRETARY OF ST

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JAN 10,2008

EXAMINER

08-3457



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 18, 2007

CHRISTOPHER ALLEN SHIMELD 3003 STILLWELL BLVD. CRESTVIEW, FL 32539

SUBJECT: CREST TECH L.L.C. Ref. Number: W07000060980

We have received your document for CREST TECH L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 707A00070475

COVER LETTER

Division of Corporations
SUBJECT: Crest Tech L.L.C
(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:
Christopher Allen Shimeld (Name of Person)
(Name of Person)
Crest Tech LLC
(Firm/Company)
3003 Stillwell Blod
(Address)
Crestice FL 32534 ES E
(City/State and Zip Code) 유급 다
For further information concerning this matter, please call:
्रा ।
(Name of Person) at (850) 682 - 5697 5 (Area Code & Daytime Telephone Number) 5 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum_{\text{Certificate of Status}}\$\$130.00 Filing Fee & Certified Copy (additional copy is enclosed)}\$\$ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	,
Crest Tech L16 (Must end with the words "Limited Liability Company, "Limited Company" or their abb	reviation "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: Mailing Address	<u>3;</u>
3003 Stillwell Blod Crestajem Fr 32539	
ARTICLE III - Registered Agent, Registered Office, & Register (The Limited Liability Company cannot serve as its own Registered Agent. You must debusiness entity with an active Florida registration.) The name and the Florida street address of the registered agent are:	signate an individual or another 01 AHASSE
Christopher Shi meid	
3003 Stilled Bld	3: 51 ORIDI
Florida street address (P.O. Box NOT a	cceptable)
erestion FC FL 32539	
City, State, and Zip	
Having been named as registered agent and to accept service of pro- liability company at the place designated in this certificate, I here registered agent and agree to act in this capacity. I further agree to statutes relating to the proper and complete performance of my du accept the obligations of my position as registered agent as provi	eby accept the appointment as comply with the provisions of all ties, and I am familiar with and

miles

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

Title: "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member MGRM" = Managing Member	Chris Shimeld 3003 Stillell Blid Crestion Fr 32539		
(Use attachment if necessary)	TALLA TALLA	2007 DI	era lina
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be spet to or 90 days after the date of filing.)	ecific and cannot be more than five business	NĄL) day <u>s</u> pr ⊋	ior
REQUIRED SIGNATURE: Signature of a member or	an authorized representative of a member.	3: <u>5</u>	في ما
(In accordance with section of this document constitutes that the facts stated herein	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)		
Typed o	or printed name of signee		

Filing Fees:

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

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

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