# 108000092659

(Requestor's Name)			
(reguests 5 runne)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
(2004)			
Contisted Coming			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



600136087026

09/22/08--01014--016 SEP 29 PM 3: 25

W08-44119 SEP 23 2000

J. BRYAN
SEP 3:0 2008
EXAMINER

Jae Garrison

# Joseph E. Garrison, CPA, PA

**Certified Public Accountant** 

Voice: 727/535-2257 Fax: 727/535-3034 e-mail: jegcpa@ij.net

September 17, 2008

Department of State Division of Corporations P.O. Box 6327 Tallahassee FL 32314

re:

C.R. Interiors, LLC

Dear Sir or Madam:

On behalf of the above referenced company, I am forwarding an original and one copy of its Articles of Organization, together with a check in the amount of \$130.00 in payment of the following:

Fee for filing Articles of Organization	\$ 100.00	9 9
Filing a Certificate designation Registered Agent	25.00	<del>عد</del> پي
Fee for a Certificate of Status	5.00	<b>2</b> 2
	•	

Total payment \$ 130.00

If you have any questions concerning this request, please free to call my office.

Sincerely yours,

Joseph E. Garrison

c:

Certified Public Accountant

C.R. Interiors, LLC

416 Douglas Avenue Dunedin, Florida 34698 Post Office Box 1221 Dunedin, Florida 34697-1221



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 23, 2008

JOSEPH E. GARRISON, CPA JOSEPH E. GARRISON, CPA, PA 416 DOUGLAS AVENUE DUNEDIN, FL 34698

SUBJECT: C.R. INTERIORS, LLC Ref. Number: W08000044119



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

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

The registered agent must have a Florida street address. A post office box is not acceptable.

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) 245-6043.

Joey Bryan Regulatory Specialist II

Letter Number: 008A00051229

#### ARTICLES OF ORGANIZATION OF

# C.R. Interiors, LLC

#### A FLORIDA LIMITED LIABILITY COMPANY

# ARTICLE I: NAME

The name of the Limited Liability company shall be: C.R. Interiors, LLC

ARTICLE II: ADDRESS

The mailing address and street address of this limited liability company is:

Highway, unit 15 Post Office Box 500996 Marathon FL 33050

## ARTICLE III: EFFECTIVE DATE AND DURATION

The company's existence shall commence upon the acceptance of the articles of organization by the Secretary of State of Florida and shall continue until terminated, liquidated, or dissolved by law or by the unanimous consent of the Members.

#### ARTICLE IV: MANAGEMENT

The Limited Liability Company is to be managed by its sole Member and the name and address of such Member is:

> Stewart L. Trowbridge Post Office Box 500996 Marathon FL 33050

### ARTICLE V: ADMISSION OF NEW MEMBERS

The right, if given, of the members to admit additional members and the terms and conditions of the admission shall be:

The manager may admit new members in its sole discretion subject to the condition that such additional member agree in writing to be bound as a member to the Operating Agreement of the Company.

# ARTICLE VI: INITIAL REGISTERED OFFICE, AGENT, AND AGE SIGNATURE:

The initial Registered Agent and the Registered Agent office of this Limited Liability Company are:

Stewart L. Trowbridge

Post Office Box 500996 4915 Oversens Highway with 15 1

Marathon FL 33050

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

# Signature of a member or an authorized representative 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 are stated herein are true.

Dated this 17th day of September 2008.

Stewart L. Trowbridge