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(Requestor's Name)					
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PICK-UP WAIT MAIL					
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SECRUTARY OF STATE OLYTSION OF CORPORATION

T. HAMPTON

DEC 3 0 2008

EXAMINER

COVER LETTER

.TO:	Registration Secti Division of Corpo				
` SURII	ECT: Cannonb	all Crewe			
50.00		(Name of Limite	d Liability	Company)	3334 - 31-11
The en	closed Articles of Or	ganization and fee(s) are s	submitted fo	r filing.	
Please	return all correspond	ence concerning this matt	er to the fol	lowing:	
	Richard W. C	Oliver, Jr.			
			Name of Per	son)	
	 		(Firm/Compa	лпу)	
	529 NW 22n	d Street			
		,	(Address))	
	Gainesville,	FL 32603			
		(City	//State and Z	ip Code)	
For fur	ther information con	cerning this matter, please	call:		
Rich	ard W. Olive	r, Jr.	at (352	376-	5155
	(Name of F	erson)		ea Code & Daytin	ne Telephone Number)
Enclos	sed is a check for th	e following amount:			
\$125.00 Filing Fee \$\sum \text{Status}\$ Certificate of Status		Certific	Filing Fee & ed Copy nal copy is enclose	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Ā 13 9	Address Legistration Section Division of Corporations LO. Box 6327 Callahassee, FL 32314	Re Di Cli 26	reet/Courier Ad- gistration Section vision of Corpor fron Building 61 Executive Ce Ilahassee, FL 32	ations nter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Co	nmnany is:				
·	inputty is.				
Cannonball Crewe, LLC					
(Must end with the words "l	Limited Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address:					
	s of the principal office of the Limited L	iability Company is:			
3	F				
Principal Office Address:	Mailing Address:	Mailing Address:			
500 NW 00-4 04	•				
529 NW 22nd Street Gainesville, FL 32603	529 NW 22nd Street				
Gainesville, FL 32003	Gainesville, FL 32603				
		-			
business entity with an active Florida registration. The name and the Florida street address Richard W. O	ss of the registered agent are:				
	Name				
529 NW 22nd	Street				
Florid	a street address (P.O. Box NOT acceptable)				
Gainesville, FL 32603 _{FL}					
	ity, State, and Zip				
Having been named as registered agen liability company at the place desig registered agent and agree to act in thi statutes relating to the proper and co	nt and to accept service of process for the nated in this certificate, I hereby accept th s capacity. I further agree to comply with mplete performance of my duties, and I an on as registered agent as provided for in C	he appointment as h the provisions of all m familiar with and			
		orapre: 000, 1 io			

(CONTINUED)
Page 1 of 2

SECRETARY OF STATE OIVISION OF CORPORATIONS

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

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

•	<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
	MGR	Richard W. Oliver, Jr. 529 NW 22nd Street Gainesville, FL 32603	
	(Use attachment if necessary)		
(If an	CLE V: Effective date, if other than the d	late of filing: (OPTIONA specific and cannot be more than five business day	•
	REQUIRED SIGNATURE:		
•	Signature of a member	Onus or an authorized representative of a member.	
	(In accordance with secti	ion 608,408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury	
	KACHARD W O Type	OLIVER DR ed or printed hame 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)