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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

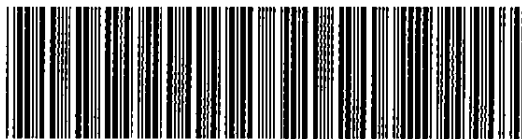
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

JUN - 9 2009

EXAMINER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Crown Royal Homes, 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:

Bill Antar, CPA  
Name of Person

Cape Coral Tax &  
Accounting Services, LLC.  
1611 Santa Barbara Blvd.  
Suite E  
Cape Coral, FL 33991

billantarcpa msn . com  
City/State and Zip Code  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bill Antar, CPA at ( 239 ) 573-9100  
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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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED  
LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

CROWN ROYAL HOMES, LLC.  
9600 Casa Mar Circle  
Ft Myers, FL 33919

**ARTICLE II - Address:**

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

CROWN ROYAL HOMES, LLC.  
9600 Casa Mar Circle  
Ft Myers, FL 33919

**Principal Office Address: Mailing Address:**

9600 Casa Mar Circle  
Ft Myers, FL 33919

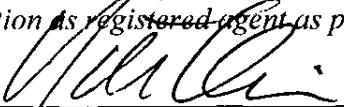
**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's**

**Signature:** (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

NATHAN S. DAVIS  
9600 Casa Mar Circle  
Ft Myers, FL 33919

*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 (REQUIRED)

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**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:**

NATHAN S. DAVIS  
(Managing Member)  
9600 Casa Mar Circle  
Ft Myers, FL 33919

CHRIS CHENEY INDIVIDUAL K  
(Member)  
5706 W. Cape Coral Parkway  
Cape Coral, FL 33914

KRISTINA DAVIS  
(Member)  
9600 Casa Mar Circle  
Ft Myers, FL 33919

**ARTICLE V: Effective date, if other than the date of filing:**

This LLC shall have perpetual existence, commencing upon the date of filing of the articles with the Florida Department of State.

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**REQUIRED SIGNATURE:**



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.)



Typed or printed name of signee