

L100000000282

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

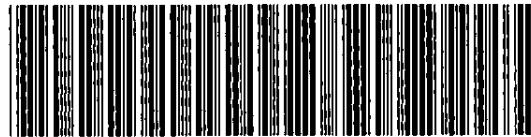
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/04/10--01002--018 **130.00

EFFECTIVE DATE

01/04/10

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2010 JAN - 4 PM 1:49
NOT RECORDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

J. BRYAN

JAN - 4 2009

EXAMINER

FILED
10 JAN - 4 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Midtown Crepe Holdings 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:

NICHOLAS KENT

Name of Person

KENT DEVELOPMENT LLC

Firm/Company

310 BLOUNT ST SUITE 101

Address

TALLAHASSEE FL 32311

City/State and Zip Code

nkent@costoneflorida.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICK KENT

Name of Person

at (850) 728 3437

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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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MIDTOWN
~~TALLAHASSEE~~ CREDE HOLDINGS LLC
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

310 BLOWNT ST
SUITE 104
TALLAHASSEE FL 32301

Mailing Address:

310 BLOWNT ST
SUITE 104
TALLAHASSEE FL 32301

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:

EFFECTIVE DATE

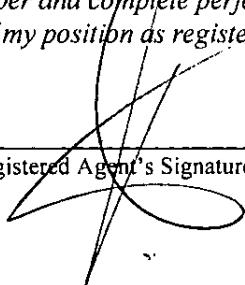
01/04/10

NICHOLAS KENT
Name

310 BLOWNT ST SUITE 104
Florida street address (P.O. Box **NOT** acceptable)

TALLAHASSEE FL 32301
City, State, and Zip

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)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

NICHOLAS KENT
310 BLOUNT ST SUITE 104
TALLAHASSEE FL 32301

MGR

CHRISTOPHER KENT
1207 N DUAL ST
TALLAHASSEE FL 32303

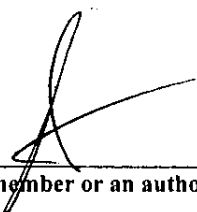
MGR

ANDREW BENNETT
204 LIGHTSEY RD
AUSTIN TX 78704

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1/04/10 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

NICHOLAS KENT

Typed or printed name of signer

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)