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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 MAY -4 PM 3:57

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Crockett Case Management, 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:

Karon Crockett
Name of Person

Crockett Case Management, LLC
Firm/Company

441 Ves Trace
Address

Birmingham, AL 35216
City/State and Zip Code

KRON 123 @ yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karon Crockett at (205) 531-1568
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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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

Article I - Name:

The name of the limited liability company is:

CROCKETT CASE MANAGEMENT, LLC

Article II - Address:

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

Principal Office Address:

6311 Jack Street
Pensacola, Florida 35204

Mailing Address:

6311 Jack Street
Pensacola Florida 35204

Article III - Registered Agent, Registered Office & Registered Agent's Signature:

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

Melissa Whatley
Melissa Whatley

6311 Jack Street

Name of Street

Pensacola, Florida 35204

City, State, and Zip

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TALLAHASSEE, FLORIDA

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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.

Melissa Whatley
Registered Agent's Signature (Required)

Article IV - Manager or Managing Member:

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

Title:

"MGRM"

Name and Address:

**Karon Crockett
441 Ves Trace,
Birmingham, Alabama 35216.**

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TALLAHASSEE, FLORIDA

Article V - Effective Date, if other than date of filing: June 1, 2010.

REQUIRED SIGNATURE:

Karon Crockett

**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.**

KARON CROCKETT, MEMBER MANAGER

Karon Crockett
Typed or printed name of signee