

H100001972503045

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H10000197250 3)))



H100001972503ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : SHUFFIELD LOWMAN
Account Number : I20030000119
Phone : (407) 581-9800
Fax Number : (407) 581-9801

FILED
 10 SEP -3 AM 8:56
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
CRITTENDEN MAI KAI, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

D. BRUCE

SEP 07 2010

EXAMINER

EFFECTIVE DATE 9/1/10

RECEIVED
 10 SEP -3 PM 1:25
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

(((H10000197250 3)))

**ARTICLES OF ORGANIZATION
OF
CRITTENDEN MAI KAI, LLC
A Florida Limited Liability Company**

**ARTICLE I
NAME**

The name of this limited liability company is CRITTENDEN MAI KAI, LLC, referred to in these Articles of Organization as the "Company."

**ARTICLE II
MAILING AND STREET ADDRESS**

The mailing address of the principal office of the Company is as follows:

P.O. Box 561079
Orlando, FL 32856

The street address of the principal office of the Company is as follows:

3437 Bocage Drive, Apt. #507
Orlando, FL 32812

**ARTICLE III
COMMENCEMENT OF COMPANY'S EXISTENCE**

In accordance with Section 608.409(1), Florida Statutes, the Company's existence shall be deemed to have commenced on September 1, 2010.

**ARTICLE IV
REGISTERED AGENT**

The address of the initial Registered Office and the Registered Agent at such address are as follows:

Jennifer R. Junker, Esq.
Shuffield, Lowman & Wilson, P.A.
1000 Legion Place, Suite 1700
Orlando, FL 32801

EFFECTIVE DATE

9/1/10

(((H10000197250 3)))

FILED
10 SEP -3 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(((H10000197250 3)))

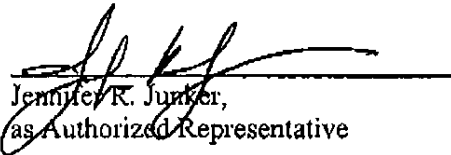
**ARTICLE V
MANAGEMENT**

The Company is to be a manager-managed company. A manager may receive compensation for his or its services. The name and address of the initial manager are as follows:

Helen J. Crittenden
P.O. Box 561079
Orlando, FL 32856

**ARTICLE VI
APPLICABLE LAW**

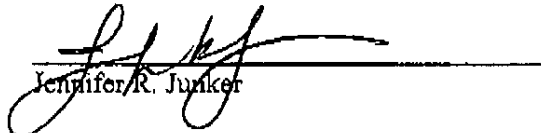
The Company is created pursuant to Chapter 608, Florida Statutes, and shall be governed by the laws of the State of Florida.


Jennifer R. Junker,
as Authorized Representative

**ACCEPTANCE OF DESIGNATION
OF
REGISTERED AGENT**

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned submits the following statement of acceptance of her designation as Registered Agent for the Company:

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 of the Florida Statutes.


Jennifer R. Junker

FILED
10 SEP - 8 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA