

L110000060344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

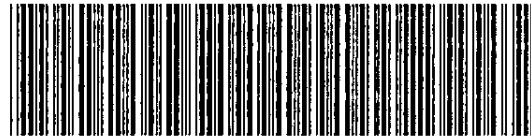
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100207296861

100207296861
05/10/11--01002--008 **125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAY 20 AM 8:23

FILED

J. SAULSBERRY
EXAMINER

MAY 23 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jessie Crawford 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:

Jessie Crawford
Name of Person

Jessie Crawford LLC
Firm/Company

7790 Bube Pace Rd.
Address

Milton, Fla. 32583
City/State and Zip Code

Wall4916@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jolie Wesley at (850) 983-3344
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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Jessie Crawford 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:

Mailing Address:

7790 Rube Pace Rd.
Milton, FL 32583

7790 Rube Pace Rd.
Milton, FL 32583

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:

Jessie Crawford

Name

7790 Rube Pace Rd.

Florida street address (P.O. Box **NOT** acceptable)

Milton, FL 32583

City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAY 20 AM 8:23

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..

Jessie Crawford
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

Mgr

Jessie Crawford
7790 Bube Pace Rd.
Milton, FL 32583

(Use attachment if necessary)

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

Jessie Crawford
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Jessie Crawford
Typed or printed name 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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 20 AM 8:23

FILED

May 18, 2011

Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

SUBJECT: JESSIE CRAWFORD, LLC
JESSIE CRAWFORD, INC.
REF. NUMBER: 100207296861
LETTER NUMBER: 011A00011706
ATTENTION: JERALINE SAULSBERRY
REGULATORY SPECIALIST II

To Whom It May Concern:

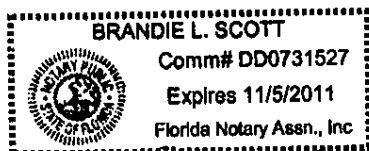
The following statements are in regard to communication and requests I received from your office. I, Jessie Crawford am the President of Jessie Crawford Inc. I request that you re-initiate activation of said Limited Liability Company named Jessie Crawford LLC. I am in fact the same person and sole owner of both businesses. The principals are the same in both entities. If you have any further questions please contact me at (850) 313-5515.

Many Thanks,



Jessie Crawford

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2011 MAY 20 AM 8:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Jessie H Crawford Dy# C616-429-63-2820
ph: 850 313-5515

Brandie L. Scott
May 18, 2011

Santa Rosa County Florida