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| PICK-UP WAIT MAIL                        |
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| (Business Entity Name)                   |
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| (Document Number)                        |
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| Certified Copies Certificates of Status  |
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| Special Instructions to Filing Officer:  |
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# **COVER LETTER**

TO:

**Registration Section** 

| 1        | Division of Corporations  |
|----------|---|
|          | SUBJECT: Cricket and Company 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:   |
|          | Charlyn E Crick   |
|          | Name of Person  |
|          |   |
|          | Firm/Company  |
|          | 15033 Princewood Lane   |
|          | Address   |
|          | Land O Lakes, FL 34638  |
|          | City/State and Zip Code   |
|          | charlynathome@yahoo.com   |
|          | E-mail address: (to be used for future annual report notification)  |
|          | For further information concerning this matter, please call:  |
|          | Charlyn E Crick at ( 813 ) 235-6824   |
|          | Name of Person Area Code & Daytime Telephone Number   |
|          | Enclosed is a check for the following amount:   |
| <b>∠</b> | \$125.00 Filing Fee \$\ \text{S155.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\ \text{Certified Copy (additional copy is enclosed)}\$\$ 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

| The name of the Limited Liability Company is:                  |  |  |  |  |  |
|--|--|--|--|--|--|
| Cricket and Company LLC  | <i>)</i>   |  |  |  |  |
| (Must end with the words "Limit                                | ted Liability Company, "L.L.C.," or "LLC.")  |  |  |  |  |
| ARTICLE II - Address: The mailing address and street address o | f the principal office of the Limited Liability Company is   |  |  |  |  |
| Principal Office Address:                                      | Mailing Address:   |  |  |  |  |
| 15033 Princewood Lane<br>Land O Lakes, FL 34638                | 15033 Princewood Lane<br>Land O Lakes, FL 34638  |  |  |  |  |
|  | sistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are: |  |  |  |  |

Charlyn E Crick

Name

15033 Princewood Lane

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

Land O Lakes

FL 34638 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..

(CONTINUED)

Page 1 of 2

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

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

| MGR  |                    | Charlyn E Crick  |
|--|--------------------|--|
|  |                    | 15033 Princewood Lane<br>Land O Lakes, FL 34638                                |
|  |                    | environment data.  |
| The At All   |                    |  |
|  |                    |  |
|  |                    |  |
| (Use attachment if r   | necessary)         |  |
| CLE V: Effective date iffective date is listed days after the date | , the date must be | date of filing: (OPTIONA e specific and cannot be more than five business days |
|  |                    |  |

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.)

Charlyn E Crick

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)