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| (Requestor's Name)                      |
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| (Address)                               |
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| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| / \                                     |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
|   |
| Certified Copies Certificates of Status |
|   |
| Special Instructions to Filing Officer: |
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Office Use Only



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SELECTION OF THE PROPERTY OF THE PROPERTY

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T. HAMPTON

EXAMINER

## **COVER LETTER**

| TO: Registration Division of            | n Section<br>Corporations   |   |  |
|---|---|---|--|
| SUBJECT: CFG                            | G, LLC  |   |  |
|   |   | ted Liability Company   |  |
| The enclosed Articles                   | of Organization and fee(s) are  | submitted for filing.   |  |
| Please return all corre                 | espondence concerning this mat  | ter to the following:   |  |
| ANDRE                                   | W A. PACE   |   |  |
|   |   | Name of Person  |  |
| CFG, LL                                 | _C  |   |  |
| - · · · · · · · · · · · · · · · · · · · |   | Firm/Company  |  |
| 2415 N.                                 | MONROE STREE  | T, SUITE 650  |  |
|   |   | Address   |  |
| TALLAHA                                 | ASSEE, FL 32303   |   |  |
| acanala@                                |   | y/State and Zip Code  |  |
| <u>aapnole@</u>                         | yahoo.com<br>E-mail address: (to be used t                                  | for future annual report notification)  | <u></u>  |
| For further informatio                  | n concerning this matter, please  | e call:   |  |
| ANDREW A. P.                            | ACE   | at ( 850) 257-1187  |  |
| Nam                                     | e of Person   | Area Code & Daytime Teler   | phone 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,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|   | Mailing Address Registration Section Division of Corporations P.O. Boy 6327 | Street/Courier Address Registration Section Division of Corporations Clifton Building |  |

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

| ARTICLE I - Name:  |   |   |
|--|---|---|
| The name of the Limited Liability Company is:  |   |   |
| OFTALLAHASSEE  |   |   |
| CFG, LLC   |   |   |
| (Must end with the words "Limited Liabi  | lity Company, "L.L.C.," or "LLC.")  |   |
| ARTICLE II - Address:  |   |   |
| The mailing address and street address of the pr   | rincipal office of the Limited Liab   | ility Company is:   |
| D 1065 A.V.  | 35 11   |   |
| Principal Office Address:  | Mailing Address:  |   |
| 2415 N. MONROE ST. STE 650   | 2415 N. MONROE ST. STE 65   | 0   |
| TALLAHASSEE, FL 32303  | TALLAHASSEE, FL 32303   |   |
| ·  |   |   |
| ARTICLE III - Registered Agent, Registered   | l Office & Registered Agent's S   | ianature.   |
| (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)   | tered Agent. You must designate an individua  | al or another   |
| The name and the Florida street address of the r   | registered agent are:   |   |
| DERICK BOHN  |   |   |
| Name   |   |   |
| 2415 N. MONRO  | E ST. STE 650   |   |
| Florida street add   | lress (P.O. Box NOT acceptable)   |   |
| TALLAHASSEE  | <sub>FL</sub> 32303   |   |
| City, Sta  | ate, and Zip  |   |
| Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered. | his certificate, I hereby accept the c<br>v. I further agree to comply with th<br>rformance of my duties, and I am fo | appointment as<br>ne provisions of all<br>namiliar with and |
| Devel Board's Signat   | ure (REQUIRED)  | 11 SECRE  |
| (CONTIN  | UED)  | 29 PASSEE   |

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:

| Title:  | Name and Address:   |
|---|---|
| "MGR" = Manager   |   |
| "MGRM" = Managing Member  |   |
| MGR   | ANDREW A. PACE  |
|   | 2415 N. MONROE ST. STE 650  |
|   | TALLAHASSEE, FL 32303   |
| 140514  |   |
| MGRM  | DERICK BOHN   |
|   | 2415 N. MONROE ST. STE 650  |
|   | TALLAHASSEE, FL 32303   |
|   |   |
| - Anna Carlo  |   |
|   |   |
|   |   |
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| (Use attachment if necessary)  LE V: Effective date, if other that  ffective date is listed, the date many  | n the date of filing: (OPTION aust be specific and cannot be more than five business da   |
| LE V: Effective date, if other that   | n the date of filing: (OPTION aust be specific and cannot be more than five business da   |
| LE V: Effective date, if other that fective date is listed, the date mudays after the date of filing.)  REQUIRED SIGNATURE:   | n the date of filing: (OPTION aust be specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date that the specific and cannot be more than five business date the specific and cannot be more than five business date that the specific and cannot be more than five business date the specific and cannot be more than five business date the specific and cannot be more than five business date the specific and cannot be more than five business date the specific and cannot be more than five business date the specific and cannot be more than the specific and cann |
| LE V: Effective date, if other that ffective date is listed, the date med days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a m  (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree   | ember or an authorized representative of a member.  on 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.)   |
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