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SEĞRETARY OF STATE ALL'AHASSEE, FLORIDA

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OCT - 6 2011

EXAMINE:

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: FORCRH, 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:	
Ruth Gray	
Name of Person	
Wade Wilson, CPA, PA	
Firm/Company	
1517 W. Garden Street	
Address	
Pensacola, FL 32502	
City/State and Zip Code  Crhiadox Va bell 5044, net  E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Yes	22
Ruth Gray at (850 ) 438-1122	8 7
Name of Person Area Code & Daytime Telephone Number	MII OCT -5
Enclosed is a check for the following amount:	Associate
\$125.00 Filing Fee \$130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	AH III DA

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:

FORCRH, 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:** 

104 Cypress Pointe East Pensacola, FL 32514 104 Cypress Pointe East Pensacola, FL 32514

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

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

Teresa Moore Name

9606 Westgate Circle Florida Street Address

Pensacola, FL 32507 City, State, and Zip Code

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..

Registered Agent's Signature

(CONTINUED)

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

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

Title:

Name and Address:

"MGRM" = Managing Member

"MBR" = Member

MGRM -

Teresa Moore

9606 Westgate Circle Pensacola, FL 32507

**MBR** 

Charles Richard Higdon IV 104 Cypress Pointe East Pensacola, FL 32514

**REQUIRED SIGNATURE:** 

Hess D. Mooce

Signature of a managing member or an authorized representative of a managing 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.)

Teresa Moore

Name of Signee

SECRETARY OF STATE