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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
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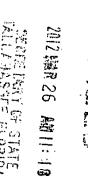
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T. CLINE

MAR 2 7 2012

EXAMINER



COVER LETTER

TO:

Registration Section

Division of Corporations		
SUBJECT: CC Balan, LLC		
	ited Liability Company	
The enclosed Articles of Organization and fee(s) are	e submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Mike Mullins, EA		
Wilke Walling, LA	Name of Person	
Mullins & Associates		
	Firm/Company	
220 Cheney Highway	•	
	Address	
Titusville Florida, 32780		
	ity/State and Zip Code	
MMikeMullins@cfl.rr.com	for future annual report notification)	
For further information concerning this matter, pleas		
Mike Mullins, EA	at (321) 383-9050	
Name of Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\int \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 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

ARTICLES OF ORGANIZATION FO	OR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Comp	any is:
CC Balan, LLC	
(Must end with the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
525 Margie Drive	
Fitusville, Florida 32780	- Titusville, Florida 32780
The name and the Florida street address of Mike Mullins, EA	of the registered agent are:
	Name
220 Cheney I	Highway
	treet address (P.O. Box NOT acceptable)
Titusville	_{FL} 32780
•	City, State, and Zip
liability company at the place designal registered agent and agree to act in this c statutes relating to the proper and comp accept the obligations of my position of the proper accept the obligations of my position of the proper accept the obligations of my position of the proper accept the obligations of the proper accept the proper accept the proper accept the proper accept the obligations of the proper accept the proper accept the obligations of the proper accept the pr	
Registered Agent's	s Signature (REQUIRED)

(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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Cesar C. Balan 525 Margie Drive Titusville, Florida 32780	
 		
(Use attachment if necessary) CLE V: Effective date, if other than the effective date is listed, the date must be	date of filing: (OPTIONA	L)
CLE V: Effective date, if other than the effective date is listed, the date must be 0 days after the date of filing.)	date of filing: (OPTIONA e specific and cannot be more than five business day	L) s p
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