L13000091748

(Req	uestor's Name)	· · · · · · · · · · · · · · · · · · ·
(Addı	ress)	
(Add	ress)	
(City/	/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Busi	iness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	iling Officer	
opeoid/ mondonono to /	ming control.	
ļ		
İ		-

Office Use Only



900249035299

06/25/13--01005--010 **130.00

ININ JUN 25 AN II: 42

N. Cuttlean JUN 2 6 2013

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	Cryptic Nothing	ngs Recordings and Liability Company	
The enclosed Articles of	f Organization and fee(s) are s	submitted for filing.	
Please return all corresp	ondence concerning this matt	er to the following:	
	Chris	Gough	
	-	Name of Person	
-1-2-2-1-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-		Firm/Company	
/	1. 1 Km) Km)	.1	
601	SW Ford Fagle 1	Address	
	Lake City	FL 32024 y/State and Zip Code	
	E-mail attdress: (to be used f	ns@amoil.Com for future samual report notification)	
For further information	concerning this matter, please	call:	
Chris Name	Gough of Person	at (386) 628-24 Area Code & Daytime Telepi	128 hone Number
Enclosed is a check for	or 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	Street/Courier Address Registration Section Division of Corporations Clifton Building	

Tallahassee, FL 32314

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:	
(Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the princ	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
607 Sw Ford Feagle pl. Lake City, FL 32024	607 Sw Food Feagle pl. Lake City, Fr 32024
ARTICLE III - Registered Agent, Registered O (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	
The name and the Florida street address of the regi	gistered agent are:
Chris Gous	Since the second secon
607 5w Ford Feagl. Florida street address	ess (P.O. Box NOT acceptable)
City, State,	FL 32024 5 5

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 (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:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Chris Gough
·	Loke City FL 32024
	
ALTERNATION OF THE PROPERTY OF	
(Use attachment if necessary)	
•	he date of filing: . (OPTIONAL)
FICLE V: Effective date, if other than the in effective date is listed, the date mu	he date of filing: (OPTIONAL) ust be specific and cannot be more than five business days
TICLE V: Effective date, if other than the effective date is listed, the date mu	st be specific and cannot be more than five business days
TICLE V: Effective date, if other than the effective date is listed, the date mu	ist be specific and cannot be more than five business days
ICLE V: Effective date, if other than the effective date is listed, the date must to or 90 days after the date of filing.)	st be specific and cannot be more than five business days SECRETARY SECRE
TICLE V: Effective date, if other than the effective date is listed, the date must to or 90 days after the date of filing.) REQUIRED SIGNATURE:	ist be specific and cannot be more than five business days SECRETARY:
CICLE V: Effective date, if other than the effective date is listed, the date must to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a memi	ist be specific and cannot be more than five business days SECRETARY:
PICLE V: Effective date, if other than the effective date is listed, the date must to or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a memical constitutes an affirmation unding a management of a m	ist be specific and cannot be more than five business days SECRETARY SECRETARY 25
REQUIRED SIGNATURE: Signature of a mem (In accordance with section 6 constitutes an affirmation und I am aware that any false info constitutes a third degree felo	ber or an authorized representative of a member. O8.408(3), Florida Statutes, the execution of this document let the penalties of perjury that the facts stated herein are true. Osmation submitted in a document to the Department of State

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)