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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (800) 293-4075

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: charlie.scaff@gmail.com

FLORIDA LIMITED LIABILITY CO.
CR Scaff Builders, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

JUL 09 2013
D. BUTLER

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

H13000152351

ARTICLE I - Name

The name of the Limited Liability Company is: **CR Scaff Builders, 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:

19700 Kenny Conner Road

19700 Kenny Conner Road

Hilliard, FL 32046

Hilliard, FL 32046

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

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

Charles R. Scaff II

Name

19700 Kenny Conner Road

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Hilliard, FL 32046

(City / State / 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.



Registered Agent's Signature - Charles R. Scaff II

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

H13000152351

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

Charles R. Scaff II - 19700 Kenny Conner Road, Hilliard, FL 32046

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

Charles R. Scaff II

Typed or printed name of signee

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

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