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JUL 2 3 2013

T. HAMPTON

(850) 245-6051.

## COVER LETTER

TO: Registration Section **Division of Corporations** Crissia Holdings 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: Jose Bonilla Name of Person Firm/Company 9840 SW 155th Ave Address Miami, FL 33196 City/State and Zip Code alsousa@sbcglobal.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:  $_{at}(850)583-4505$ Al Sousa Area Code & Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (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

ADDICE DE LE		
ARTICLE I - Name: The name of the Limited Liability Company is:		
, ,		
Crissia Holdings LLC		
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the prin	ncipal office of the Limited Liability Compar	ny is:
Principal Office Address:	Mailing Address:	
9840 SW 155 Ave	9840 SW 155th Ave	
Miami, FI 33196	Miami, FL 33196	
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)		
The name and the Florida street address of the re	gistered agent are:	
Jose Bonilla		
Name		
9840 SW 155th Ave		
	ress (P.O. Box NOT acceptable)	
Miami, FL 33196	FL	
City, Stat	te, 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 capacitall statutes relating to the proper and complete and accept the obligations of my position as reg	nis certificate, I hereby accept the appointment ty. I further agree to comply with the provision performance of my duties, and I am familiar	t as ons of with
registered Agent's Signatu	JUL 2:	SECRETARY)
Page 1 of 2	AH 10: 51	OF STATE

## **ARTICLE 1V- Manager(s) or Managing Member(s):**

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

Title: "MGR" = Manager "MGRM" = Managing Membe	Name and Address:
MGRM	Al Sousa
	9840 SW 155th Ave
	Miami, FL 33196
MGRM	Carlos Bobbio
	9840 SW 155th Ave
	Miami, FI 33196
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	than the date of filing: (OPTIONA te must be specific and cannot be more than five busines iling.)
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\$ 5.00 Certificate of Status (Optional)