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2014 AUG 21 AM (D): 39
SECRETARY OF STATE
FALLWHASSEE, FLORID

AUG 22 2014 T CLINE

## **COVER LETTER**

TO: Registration Section Division of Corporations  SUBJECT: Crown Vapor 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:	
Alexander Moore	
Name of Person	
Firm/Company	
2721 Windsong Circle	to y
	; ;
Palm Harbor FL 34684	- ( - [**[*];
City/State and Zip Code  Crounvapor   C@gmail.Com  E-mail address: (to be used for future annual report notification)	5
For further information concerning this matter, please call:	្ត
Alexander Moore at (727) 614 - 2413  Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
▼ \$125.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Crown Vapor LL (Must end with the wo	'	' or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability (	Company is:
Principal Office Address:	Mailing Address:	
2721 Windsong circle Palm Harbor, FLV, 34684	Alex Moore	Circle
	Palm Harbor PL,	34684
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serva nother business entity with an active Florida.)	ve as its own Registered Agent. You must	designate an individual or
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot servanother business entity with an active Florida The name and the Florida street address of the servanor of t	ve as its own Registered Agent. You must da registration.)  he registered agent are:	designate an individual or
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot servanother business entity with an active Florida The name and the Florida street address of the Alex Mook	ve as its own Registered Agent. You must da registration.)  the registered agent are:  Name	designate an individual or NAME 21 AUG 21
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot servanother business entity with an active Florida The name and the Florida street address of the Alex Mood	ve as its own Registered Agent. You must da registration.)  the registered agent are:  Name	designate an individual or AUG 21 AUG

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 605, F.S..

Registered Agent's Signature (REQUIRED)

Page 1 of 2

(CONTINUED)

"AMBR" = Authorized Member "MGR" = Manager AMBR  AMBR	Alexander Moore 2721 Windsong Circle Palm Harbor VFL,34684  Ryan Beebler 3552 Rolling Trail
AMBR	Ryan Beebler  8552 Rolling Trail
AMBR	Ryan Beebler For 3552 Rolling Trail
	Palm Harbor OFL, 34684 74 5
<u></u>	<u> </u>
(Use attachment if necessary)	
TICLE V: Effective date, if other than the date of	filing: (OPTIONAL)
	ic and cannot be more than five business days prior to or 90 d
<u>.</u>	
TICLE VI: Other provisions, if any.	
TICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
required signature:	ar or on authorized representative of a member
REQUIRED SIGNATURE:  Signature of a memb  (In accordance with section 605.0)  constitutes an affirmation under the	er or an authorized representative of a member. 203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, ion submitted in a document to the Department of State is provided for in s:817.155, F.S.)
REQUIRED SIGNATURE:  Signature of a memb (In accordance with section 605.0) constitutes an affirmation under th I am aware that any false informat constitutes a third degree felony as	203 (1) (b), Florida Statutes, the execution of this document to penalties of perjury that the facts stated herein are true. ion submitted in a document to the Department of State