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OCT 03 2014 S. YOUNG

COVER LETTER

SUBJECT: Crafting Hand 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: Andrew T. Barker Name of Person Crafting Hand Firm/Company 1510 W Carmen St Apt 3318 Address Tampa FL, 33606 City/State and Zip Code drew@craftinghand.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Andrew Barker Name of Person Enclosed is a check for the following amount: □\$160.00 Filing Fee, □ \$125.00 Filing Fee **✓**\$130.00 Filing Fee & □\$155.00 Filing Fee & Certified Copy Certificate of Status Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section

Division of Corporations

.-TO:

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

Craftting Hand, LLC.		
(Must	end with the words "Limi	ited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and str	eet address of the principa	al office of the Limited Liability Company is:
Principal Office Address:		Mailing Address:
1510 W.Comon St		1510 W Carmen St
1510 W Carmen St		
Apt 3318		Apt 3318
Apt 3318 Tampa FL 33606 ARTICLE III - Registered (The Limited Liability Com	pany cannot serve as its o	Tampa FL 33606 ce, & Registered Agent's Signature: own Registered Agent. You must designate an individual
Apt 3318 Tampa FL 33606 ARTICLE III - Registered (The Limited Liability Comanother business entity with	pany cannot serve as its on an active Florida registra	Tampa FL 33606 ce, & Registered Agent's Signature: own Registered Agent. You must designate an individual ation.)
Apt 3318 Tampa FL 33606 ARTICLE III - Registered (The Limited Liability Comanother business entity with the name and the Florida stress.)	pany cannot serve as its on an active Florida registra	Tampa FL 33606 ce, & Registered Agent's Signature: own Registered Agent. You must designate an individual ation.)
Apt 3318 Tampa FL 33606 ARTICLE III - Registered (The Limited Liability Comanother business entity with the name and the Florida stress.)	pany cannot serve as its on an active Florida registratest address of the registed rew T. Barker	Tampa FL 33606 ce, & Registered Agent's Signature: own Registered Agent. You must designate an individual ation.)
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Apt 3318 Tampa FL 33606 ARTICLE III - Registered (The Limited Liability Comanother business entity with The name and the Florida state of the Limited Liability Comanother business entity with the name and the Florida state of the Limited Liability Comand and the Florida state of the Liability Comand and t	pany cannot serve as its on an active Florida registrateet address of the registed drew T. Barker	Tampa FL 33606 ce, & Registered Agent's Signature: own Registered Agent. You must designate an individual ation.) ered agent are:
Apt 3318 Tampa FL 33606 ARTICLE III - Registered (The Limited Liability Comanother business entity with The name and the Florida state of the Limited Liability Comanother business entity with The name and the Florida state of the Limited Liability Comand III (The name and The	pany cannot serve as its on an active Florida registrateet address of the registed drew T. Barker Na O W Carmen St, apt 33	Tampa FL 33606 ce, & Registered Agent's Signature: own Registered Agent. You must designate an individual ation.) ered agent are:

at 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)

(CONTINUED)

Page 1 of 2

<u> </u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager MGR	Andrew T. Barker
	1510 W Carmen St. apt 3318
	Tampa FL., 33606
	
V: Effective date, if other than the tive date is listed, the date must be	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 9
V: Effective date, if other than the tive date is listed, the date must be filing.) VI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 9
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V: Effective date, if other than the tive date is listed, the date must be filling.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation I am aware that any false it constitutes a third degree to	a member or an authorized representative of a member. In 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State release provided for in s.817.155, F.S.)
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