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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

	egistration Section vision of Corporations		
SUBJECT	Crane/Guzman Family Enterprise	es LLC	
3000201		f Limited Liabi	lity Company
The enclose	ed Articles of Organization and fee(s) are submitted	for filing.
Please retur	m all correspondence concerning th	is matter to the	following:
	Lindsay Guzman		
		Name of	Person
		Firm/Co	ompany
	5836 Lago Del Sol Dr		
		Addı	ress
	Lake Worth, FL 33449		
1	crane24@yahoo.com	City/State ar	d Zip Code
-	····	used for future	annual report notification)
For further in	formation concerning this matter, p	lease call:	
	Luis Guzman	561 t (756-0650
•	Name of Person	Area Code	Daytime Telephone Number
Enclosed is	a check for the following amount:		
\$ 125.00 Fi	Sing Fee \$130.00 Filing Fee Certificate of Status	s LCertifi	20 Filing Fee & \$160.00 Filing Fee, ed Copy Certificate of Status & Certified Copy (additional copy is enclose
	Mailing Address New Filing Section		Street Address New Filing Section
	Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		25	6
Crane/Guzman Family Enteerprises LLC			
(Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	1	Ī
ARTICLE II - Address:		ME.	1
The mailing address and street address of the principal office	of the Limited Liability Company is:	33	-
		<u> </u>	
Principal Office Address:	Mailing Address:		PH 12:
5836 Lago Del Sol Dr	5836 Lago Del Sol Dr	물질	21
Lake Worth, FL 33449	Lake Worth, FL 33449		

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

	Name	
5836 Lago Del Sol I	Dr	
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
	FL.	33449
Lake Worth	I L	00117

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 Spent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

"AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager				
AMBR	Glen Crane			
AWDI		11.		
	Farmington, CT 06032	<u> </u>	5	
		115	<u></u>	
AMBR		71:1" 7:> ==		4
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		(11 - 1	+	1
	t withington, Or Oods	<u>, , , , , , , , , , , , , , , , , , , </u>	PH	
AMBR	Lindsay Guzman	-L11		**********
THATA		<u> </u>	$\vec{\Sigma}$	Name of the last
	Lake Worth, FL 33449	2	2	
	LORD WOLLING IN DUTIES			
AMBR	Luis Guzman	•		
***************************************	5836 Lago Del Sol Dr			
	Lake Worth, FL 33449			
	*3			
the date of filing.)	be specific and cannot be more than five business days prior t not meet the applicable statutory filing requirements, this date	to or 90	•	

Filing Fees:

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

Lindsay Guzman
Typed or printed name of signee

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)