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| | egistration Section ivision of Corporations | | | |
|---------------|---|--|--------------|---------|
| SUBJECT | Bret Crino Realt Estate, LLC | mited Liability Company | | |
| | Name of El | miled Elabinty Company | | |
| The enclos | sed Articles of Organization and fee(s) a | re submitted for filing. | | |
| Please retu | ırn all correspondence concerning this m | natter to the following: | | |
| | Bret Crino | | | |
| | | Name of Person | | |
| | Bret Crino Real Estate, LLC | | | |
| | | Firm/Company | | |
| | 4217 La Dega Ct | | | |
| | | Address | | IA N |
| | Tampa Florida 33611 | Addiese | 6 | |
| | | City/State and Zip Code | - | |
| | BretSellsTampa Bay@gmail.com | | <u></u> | 1140 |
| | E-mail address: (10 be use | d for future annual report notification) | င္မာ | |
| For further i | nformation concerning this matter, pleas | se call: | Ü | D.H |
| | Bret Crino 8 at (| 313 416-1122 | | |
| | | Area Code Daytime Telephone Number | | |
| Englaced i | s a check for the following amount: | | | |
| \$125.00 F | - | \$155.00 Filing Fee & \$160.00 Filing Certificate of S (additional copy is enclosed) Certified Copy (additional copy | Status & | |
| | Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle | | |

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| A | R | 7 | l | C | L | Ε | 1- | N | a | me | |
|---|---|---|---|---|---|---|----|---|---|----|--|
|---|---|---|---|---|---|---|----|---|---|----|--|

The name of the Limited Liability Company is:

| Bret | Crino | Real | Estate | LL | C |
|------|-------|------|--------|----|---|
| | | | | | |

(Must end with the words "Limited Liability Company, "L.L.C.," or "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:

| 4217 La Dega Ct | 4217 La Dega Ct |
|-----------------|-----------------|
| Tampa Fl 33611 | Tampa, FL 33611 |
| | |

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

(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:

| Bret Crino | | | क |
|-----------------------|----------------------------|------------|----------|
| | Name | | |
| 4217 La Dega Ct | | | <u> </u> |
| Florida street addres | ss (P.O. Box <u>NOT</u> ac | cceptable) | PH |
| Tampa | FL | 33611 | === こ |
| City | State | Zip |); 55 |

gent's Signature (REQUIRED)

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..

(CONTINUED)

Page 1 of 2

ARTICLE IVThe name and address of each person authorized to manage and control the Limited Liability Company:

| "AMBR" = Authorized M | | |
|--|--|--------------|
| "MGR" = Manager | ••••• | |
| MGR | Bret Crino | |
| | 4217 La Dega Ct | _ |
| | Tampa, FL 33611 | |
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| If the date inserted in this bl | ock does not meet the applicable statutory filing requirements, this date will be Department of State's records. | l not be lis |
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