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PALL AHASSEE, FLORID

V HERRING SEP 2 9 2016

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: MS Cribbel Holdings The Company The enclosed Articles of Organization and fee(s) are submitted for filing.			
Richard D. Solik Name of Person			
Firm/Company			
MYL E. Grant St. Address			
City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Ruboid Salk at (407) 534-5908 Name of Person Area Code Daytime Telephone Number			
Enclosed is a check for the following amount:			
\$125.00 Filing Fee S130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Address Street Address			
New Filing Section New Filing Section			

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

. ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	FILED
The name of the Limited Liability Company is:	2016 SEP 27 AM 10: 53
(Must end with the words "Limited Liability	SEUM MARY OF STATE Company, "L.L.C.," or "LLC." PATTASSEE, FLORIDA
ARTICLE II - Address: The mailing address and street address of the principal office of the	
Principal Office Address:	Mailing Address:
MATE Colour 29	MAT ERIOUT AP
Whoods F) 3280C	Wands, F) 32306
another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Name YYLE. GLAR Florida street address (P.O. Box	X NOT acceptable)
City State	3>\$6 С e Zip
Having been named as registered agent and to accept service of proce place designated in this certificate, I hereby accept the appointment as further agree to comply with the provisions of all statutes relating to th am familiar with and accept the obligations of my position as registere	registered agent and agree to act in this capacity. I be proper and complete performance of my duties, and I

Page 1 of 2

(CONTINUED)

ARTICLE IV- The name and address of each person authorized Title:	d to manage and control the I	FILED Limited Liability Company:
Title: "AMBR" = Authorized Member "MGR" = Manager	Richard D. Sal	JALLAHASSEE STATE
MGR	Mother T. 1 Myb E. Grand Ullando, F).	1240h
		
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing. If an effective date is listed, the date must be specific at the date of filing.) Note: If the date inserted in this block does not meet the document's effective date on the Department of State ARTICLE VI: Other provisions, if any.	nd cannot be more than five applicable statutory filing re	business days prior to or 90 days after
REOUIRED SIGNATURE: Signature of a member of This document is executed in a I am aware that any false inform constitutes a third degree felony	nation submitted in a docume	203 (1) (b), Florida Statutes. nt to the Department of State
Zichard	d or printed name of signee	·

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)