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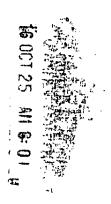
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OCT 2 7 2016 T. SCOTT



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COVER LETTER

",

TO: Registration Section Division of Corporations
SUBJECT: Crustal River Construction LC, 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:
Dana Neumos
Name of Person
Firm/Company
10730 71653 Street Address
Sunnise, FL 33351 City/State and Zip Code
doxa@ girestoration.com
E-mail address: to be used for future annual report notification)
For further information concerning this matter, please call:
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

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

ARTICLE I - Name: The name of the Limited Liabilit	y Company is:		
(Must end v	ustal River	CONSTRUCT ability Company, "L.I.	ion UC
ARTICLE II - Address: The mailing address and street ad	ldress of the principal offic	e of the Limited Liabi	lity Company is:
Principa	al Office Address:		Mailing Address:
10130 Mi Suncise S	O 53 Skreet FL 33351		M30NW53 Street Mrise FL 33351
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own Re	gistered Agent. You n	
The name and the Florida street a	address of the registered ag	ent are:	
	Dax ?	teurous	
	_ () N	lame	
	10730 Mu	53 Street	
	Florida street address (F	P.O. Box NOT accepta	able)
	_ Surise P	-C 33351	
	City	State	Zip
place designated in this certificate,	I hereby accept the appoin ovisions of all statutes relat digations of my position as t	tment as registered age ting to the proper and c	
	/		

Page 1 of 2

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Me "MGR" = Manager	mber
MGR = Manager	Dava Newhours
	10138 MW 53 Street
	Sunrise FL 33351
	-
	
fective date is listed, the dat	y) than the date of filing: 10-0+10 (OPTIONAL) e must be specific and cannot be more than five business days prior to or 90 d
LE V: Effective date, if other ffective date is listed, the date of filing.) If the date inserted in this blownent's effective date on the	than the date of filing: (OPTIONAL) the must be specific and cannot be more than five business days prior to or 90 deck does not meet the applicable statutory filing requirements, this date will not be Department of State's records.
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