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PICK-UP WAIT MAIL				
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COVER LETTER

	w Filing Section vision of Corporations			
SUBJECT:	Crenshaw Properties,LLC			
Name of Limited Liability Company				
The enclose	d Articles of Organization and fed	e(s) are submitted	d for filing.	
Please retur	n all correspondence concerning t	his matter to the	following:	
	Danny K Crenshaw			
		Name of	f Person	
	·	Firm/Co	oinpany	
	2160 Oxbow Road			
,		Add	ress	
	Jacksonville,FL 32210			
_			Bell South · Net	
or further in	E-mail address: (to be formation concerning this matter,		annual report notification)	
i	Danny K Crenshaw	904 at (781-7276	
-	Name of Person	Area Code	Daytime Telephone Number	
Enclosed is	a check for the following amount	:		
\$125.00 Fil	ing Fee \$130.00 Filing Fee Certificate of Stat	us L—ICertif	00 Filing Fee & S160.00 Filing Fee. Tied Copy Certificate of Status & Certified Copy (additional copy is enclosed)	
	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 1 - Name: The name of the Limited Liability	y Company is:	
Crenshaw Properties,	LLC	
(Must conta	in the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad	dress of the principal office	of the Limited Liability Company is:
Princips	l Office Address:	Mailing Address:
2160 Oxbow Road		2160 Oxbow Road
Jacksonville,FL 3221	0	Jacksonville.FL 32210
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own Regi	egistered Agent's Signature: stered Agent. You must designate an individual or
The name and the Florida street a	ddress of the registered ager	at are:
	Danny K Crenshaw	
	Nai	ne Shi
	2160 Oxbow Road	
	Florida street address (P.C	D. Box NOT acceptable)

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..

FL

State

32210

Zip

Jacksonville

City

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Danny K Crenshaw
	2160 oxbow Rd
	Jacksonville.FL 32210
	
	
(Use attachment if necessary)	
CLE V: Effective date, if other than the date	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90 da
e of filing.)	pecine and cannot be more than five business days prior to or 90 da
If the date inserted in this block does not	meet the applicable statutory filing requirements, this date will not be
cument's effective date on the Department	t of State's records.
CLE VI: Other provisions, if any.	!
REQUIRED SIGNATURE:	
レフラ	

Filing Fees:

Typed or printed name of signee

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Danny K Crenshaw

SECRULAR CONSTANT
SECRETAR ARTOR STATE
SECRETAR ART