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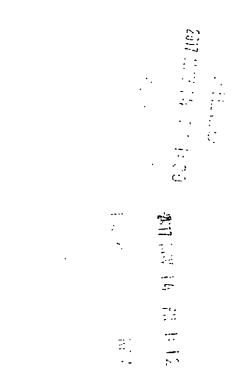
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COVER LETTER

	w Filing Section vision of Corporations	
SUBJECT:	CRAIG'S CAR	PENTRY L.L.C. f Limited Liability Company
The enclose	ed Articles of Organization and feet	s) are submitted for filing.
Please return	n all correspondence concerning thi	is matter to the following:
-	STE	WE CRAIG Name of Person
		··· ···
	9038	OLD WOODVILLE RD. SUITEB
-	STEVE	FL 32305 City/State and Zip Code C6969@GMAIL COM used for future annual report notification)
For further in	formation concerning this matter, p	
-	Name of Person	Area Code Daytime Telephone Number
	a check for the following amount: ling Fee S130.00 Filing Fee Certificate of Status	& \$155.00 Filing fee. S Certified Copy (additional copy is enclosed) (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

CHECK OR MONEY ORDER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:#1	
CLAIG'S CARPE (Must contain the words 1 mited Liability	ENTRY L.L.C.
(Must contain the words/Himited Liabilit	y 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:
9038 OLD WOODVILLE RO.	9038 OLD WODVILLE RD.

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:

WOODVILLE, FL. 32305

ARTICLE I - Name:

STEUR CRAIG

Name

9038 OLD INCODVILLE RD APT; B

Florida street address (P.O. Box NOT acceptable)

WCODVILLE FL. 3230, 5

City State Zip

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)

gistered Agent's Signature (REQUIRED)

Title: "AMBR" + Author "MGR" - Manager		Name and Address:
MGR		STEVE CRAIG 9038 OLD WOODVILLERO APT. B WOODVILLE, FL 32305
		
(Use attachment if	necessary)	
RTICLE V: Effective date fan effective date is listed e date of filing.) ote: If the date inserted in document's effective date	e, if other than the date of a the date must be specification this block does not meet to on the Department of S	filing:
RTICLE V: Effective date f an effective date is listed e date of filing.) ote: If the date inserted in	e, if other than the date of a the date must be specification this block does not meet to on the Department of S	ic and cannot be more than five business days prior to or 90 days after t the applicable statutory filing requirements, this date will not be listed a

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)