# Jorida Depart near Se Sivilor on Caporata as Exercise Filing Corp. then

Note: Please point this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000157524 3)))



H180001575243ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LLOYD GRANET Account Number : 074632001025 Phone : (561)999-9300 Fax Number : (561)999-9400

Pfinton the amail address for this husiness comits to b

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

mail Address: Terri . Keoglia

8 MAY 22 AM B 3

# FLORIDA LIMITED LIABILITY CO.

# CRC GO LLC

PM 12: 49	CONTINUES OF SERVICES
18 HAY 22	TO SECUL

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 23 2016 C Kinsey Fax Audit: \_\_\_ (((H18000157524 3)))

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# ARTICLE I - Name:

The name of the limited liability company is:

CRC GO LLC

ARTICLE II - Address:

The street and mailing address of the principal office of the limited liability companying.

95 FOREST AVENUE LOCUST VALLEY, NY 11560

# ARTICLE III - Initial Manager

The limited liability company is manager managed. The initial Manager of the limited liability company shall be:

## BERNADETTE CASTRO and TERRI KEOGH

each of whom may act solely on behalf of the Company without the joinder of the other and is authorized, empowered and directed to do or cause to be done all such acts or things and to sign and deliver, or cause to be signed and delivered, all documents, instruments and certificates in the name and on behalf of the Company. They shall serve until they shall resign, die or a replacement shall be elected.

# ARTICLE IV - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and Florida street address of the registered agent is:

# Lloyd Granct, P.A. 2295 NW Corporate Boulevard, Suite 235 Boca Raton, FL 33431-7330

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.

By: Registered Agent's Signature

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true). I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Signature of a member or an authorized representative of a member

[2018-137/492934/2]

Fax Audit: \_\_\_\_\_ (((H18000157524 3))) \_\_\_\_