Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print 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.

(((H19000221142 3)))



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 : SHUFFIELD LOWMAN Account Number : I20030000118

Phone : (407)581-9800 Fax Number

: (407)581-9801

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

Email Address: REGISTEREDAGENT-WRL@SHUFFIELDLOWMAN.COM

FLORIDA LIMITED LIABILITY CO. CRESTED KIVA, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

^cElectronic Filing Menu Corporate Filing Menu

Help

J DENNIS

(((H19000221142 3)))

新花

19 JUL 23 AH 9-16

ARTICLES OF ORGANIZATION OF CRESTED KIVA, LLC A Florida Limited Liability Company

ARTICLE I NAME

The name of this limited liability company is CRESTED KIVA, LLC, referred to in these Articles of Organization as the "Company."

ARTICLE II MAILING AND STREET ADDRESS

The street address of the principal office of the Company is as follows:

18981 U.S. Hwy 441, Unit 357 Mount Dora, FL 32757

The mailing address of the principal office of the Company is as follows:

18981 U.S. Hwy 441, Unit 357 Mount Dora, FL 32757

ARTICLE III COMMENCEMENT OF COMPANY'S EXISTENCE

In accordance with Section 605.0207, Florida Statutes, the Company's existence shall be deemed to have commenced on the date and at the time the record is filed as evidenced by the Florida Department of State's endorsement of the date and time on the record.

ARTICLE IV REGISTERED AGENT

The name and Florida street address of the initial Registered Agent are as follows:

William R. Lowman, Jr., Esq. Shuffield, Lowman & Wilson, P.A. 1000 Legion Place, Suite 1700 Orlando, FL 32801 (((H19000221142 3)))

19 JUL 23 RM 9 18 ARTICLE V

MANAGEMENT

The name and address of each person initially authorized to manage and control the Company, until their successors are appointed, are as follows:

> Name and Address Title

Jerry P. Brown Manager

18981 U.S. Hwy 441, Unit 357

Mount Dora, FL 32757

Lisa G. Brown Manager

18981 U.S. Hwy 441, Unit 357

Mount Dora, FL 32757

ARTICLE VI APPLICABLE LAW

The Company is created pursuant to Chapter 605, Florida Statutes, and shall be governed by the laws of the State of Florida.

> iam R Lowman, Jr., Esq., as-Authorized Representative

ACCEPTANCE OF DESIGNATION **OF** REGISTERED AGENT

Pursuant to the provisions of Section 605.0113, Florida Statutes, the undersigned submits the following statement of acceptance of his designation as Registered Agent for the Company:

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 of the Florida Statutes.

Dowman, Jr., Esq.