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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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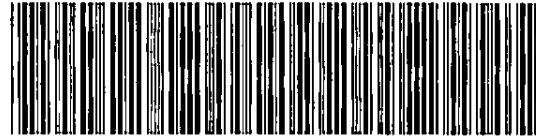
(Business Entity Name)

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SECURITY STATE
TALLAHASSEE, FLORIDA

APR 29 2020

A Brumbley

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Eric Crum, LLC
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:

Eric Crum

Name of Person

Eric Crum, LLC

Firm/Company

1009 Carlisle Street

Address

Natrona Heights, PA 15065

City/State and Zip Code

ecterpfsan@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eric Crum

412

500-3914

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
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 I - Name:

The name of the Limited Liability Company is **Eric Crum, LLC**.

ARTICLE II - Address:

The office and mailing addresses of the principal office of the Limited Liability Company are:

Principal Office Address:

1009 Carlisle Street
Natrona Heights, PA 15065

Mailing Address:


1009 Carlisle Street
Natrona Heights, PA 15065

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

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

Paul Grivas
Anderson & Brodersen, P.A.
350 Corey Avenue
St. Pete Beach, FL 33706

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.



Registered Agent's Signature

ARTICLE IV- The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
AMBR	Eric Crum 1009 Carlisle Street Natrona Heights, PA 15065

AMBR

Kristen O'Neil
1009 Carlisle Street
Natrona Heights, PA 15065

REQUIRED SIGNATURE:

A handwritten signature in cursive script, reading "Kristen O'Neil", written over a horizontal line.

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.