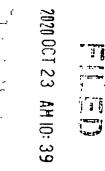
L20000 328943

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer
<u></u>

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23 PM 2: UO

C RICO OCT 2 3 2020 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE: 465883 7582415
AUTHORIZATION: Symulocleman
COST LIMIT : \$ 1.25-00
ORDER DATE : October 22, 2020
ORDER TIME : 10:45 AM
ORDER NO. : 465883-015
CUSTOMER NO: 7582415
DOMESTIC FILING
NAME: CRO WOOLBRIGHT, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Amanda Robinson - EXT. 62968
EXAMINER'S INITIALS:
DARITHER S INTITALS.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Cro Woolbright, I					_	
(Must co	onatin the words "Limited	Liability Company,	"L.L.C" or "LLC.")			
ARTICLE II - Address: The mailing address and stree	et address of the principal	office of the Limited	Liability Company is:			
<u>Princ</u>	Principal Office Address:		Mailing Address:			
2260 Woolbright Rd		2271	Landmark Pl			
Boynton Beach, FL 33426		Man	asquan NJ 08736		<u>.</u>	
					-	
ARTICLE III - Registered A						
- Line i imitea i ianiiitti omba		15	/	P 11 . C .		
another business entity with a			ou must designate an ind	lividual or		
another business entity with a	an active Florida registrati	on.)	'ou must designate an ind	lividual or	28	
	an active Florida registrati	on.) d agent are:	'ou must designate an ind	lividu a l or	2029 (
another business entity with a	an active Florida registrati	on.) d agent are: : Company	ou must designate an ind	lividual or	2029 OCT	5 54 m
another business entity with a	an active Florida registrati	on.) d agent are:	ou must designate an ind	lividual or	2079 OCT 23	1
another business entity with a	et address of the registrati Corporation Service 1201 Hays Street	on.) d agent are: : Company Name		lividual or	2079 OCT 23 A	Fig. 1. Sec. 1
another business entity with a	et address of the registrati Corporation Service 1201 Hays Street	on.) d agent are: : Company		lividual or		
another business entity with a	et address of the registrati Corporation Service 1201 Hays Street	on.) d agent are: : Company Name			AH 10:	
another business entity with a	et address of the registere Corporation Service 1201 Hays Street Florida street address	on.) d agent are: : Company Name ss (P.O. Box NOT ac	eceptable)	lividual or		

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address;
"AMBR" = Authorized Member "MGR" = Manager	
-	D.10
<u>MGR</u>	Robert Cancro 2271 Landmark Pt
	Manasquan NJ 08736
	741
	
(Use attachment if necessary)	
TICLE V: Effective date, if other than the	ne date of filing: (OPTIONAL)
	be specific and cannot be more than five business days prior to or 90 days after
date of filing.) te: If the date inserted in this block doe	s not meet the applicable statutory filing requirements, this date will not be listed as
document's effective date on the Depar	
·	
TICLE VI: Other provisions, if any.	
DESCRIPTION OF STREET	
REOUIRED SIGNATURE:	The law
Signature o	f a member or an authorized representative of a member.
This document is	executed in accordance with section 605.0203 (1) (b), Florida Statutes, by 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.
Robert Car	Typed or printed name of signee

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)