_21000020879

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

Office Use Only



600358547556

01/25/21--01019--001 **125.00

1 1 1 1 1

2021 JAN 25 PH 12: 11

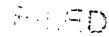
COVER LETTER

Mailing Address

New Filing Section
Division of Corporations
P.O Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite \$10 Tallahassee, FL 32303



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY.

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECAL (ACC) UF STATE

Crum the Construction LLC or or ULC)

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
1571 Blue lake Road NONTICETTO, FL 32344	P.O BOX 7 Green VIIIE, FL 32331

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:

Name

Name

| STIBILITY | 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.

Begistered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager / Manager	Figh Cvumitie 1377 Bludgentes monticilo FIH 32344	
		28
		2021 JAN 25 PH I2: 1
	TATI	PM 12: 111
(Use attachment if necessary)	ta ta	
If an effective date is listed, the date must be specifine date of filing.) Note: If the date inserted in this block does not meet the document's effective date on the Department of SARTICLE VI: Other provisions, if any.		
		_
This document is executed I am aware that any false in constitutes a third degree for	ther or an authorized representative of a member. It in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.	

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)

ARTICLE IV-