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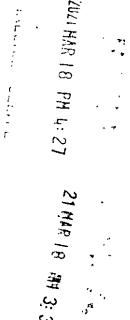
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COVER LETTER

New Filing Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO:

SUBJECT: Crum Point and Handyman Services 1.1.C. 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:
Name of Person
Crum Pegn + and Handyman Services Firm/Company
5879 Deer Park Carcle Fatt, Ft. 33311 Address
Tallahussee Florida 32311 City/State and Zip Code No4thcrum 110 gmail.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee Status S130.00 Filing Fee Status Certified Copy (additional copy is enclosed) S125.00 Filing Fee Status S155.00 Filing Fee Status S2160.00 Filing Fee, Certificate of Status S216
Mailing Address New Filing Section Street Address New Filing Section Division

The Centre of Tailahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Crum Paint (Musi contai	and Handyman the words "Limited Liab	<u>A Service</u> ility Company. "	<i>es L.L.C.</i> L.L.C.," or "LLC.")	<u>. </u>	
ARTICLE II - Address: The mailing address and street add	lress of the principal office	of the Limited	Liability Company is:		
Principa	Office Address:		Mailing Addr	<u>'ess</u> :	
	ork St. Circle		SAME		<u>-</u>
ARTICLE III - Registered Ages (The Limited Liability Company) another business entity with an ac	rannot serve as its own Re etive Florida registration.)	gistered Agent. \	t's Signature: You must designate an in	dividual or	ZUZI HAR
The name and the Florida street a	•			:	
	heith Chum	1		•	α
	N	ame		;	
	5879 Deg P	ark Carol	<i></i>	(-	.
	Florida street address (f	P.O. Box <u>NOT</u> a	cceptable)	٢	27
	Talle hossee	FL	39311		
	Tallahassee City	State	Zip		
Having been named as registered of place designated in this certificate, further agree to comply with the pram familiar with and accept the ob-	igent and to accept service I hereby accept the appoin ovisions of all statutes rela	of process for the tment as register ting to the prope registered agent	e above stated limited lian ed agent and agree to ac r and complete performa as provided for in Chapta	a in inis capac nce of my duti	my, i

(CONTINUED)

MGT SS 79 Dece fact Crecke TG.H., EL 322/1 Te segre Com 53.79 Dece Fact Crecke TG.H., EL 322/1 Te segre Com 53.79 Dece Fact Crecke TG.H., EL 323/1 (Use attachment if necessary) (CLE No fifte two date of other than decidite of liftings of the content of the interest between the content of the interest between the content of the con	Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
(Use attachment if necessary) ICUE No 196c tive date of other than the date of hings () (OPTIONALS) reflective date is listed, the date musc be specific and cannot be more than five business days prior to or 90 days after attendabling. 10 the date of critical of 7 is block does not meet the approachers tatutory filing requirements of the date worked observed as account of criticals of the parton and Statels records.	-mgr	HOTTO COUM 5879 Dece Pach Circle IEll, EL 322/1
ICLEAN Hillicurve date. Fother than modate of filings and cannot be more than five business days prior to or 90 days after a stilling. The third date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after a stilling. The third date in seried of 7 is block does not meet the appropriate istatutory filing requirements that date was an obserted as more or of the last date was an obserted as observed.	mge.	Tessaca Coum 5879 Deer Pach Circle Tall, Fl 32311
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1CEPACE CHIEF INCOME MAN.	Gradient and the way and the contraction	

Signature of a memberior an authorized representative of a member: This document is executed an accommon with sermon 605,0203.(4) (b) a Florida Statutes at I am aware that any false information submitted in adocument to the Department of States, a constitutes a third-degree felony as provided for in \$.817, \(\text{P55.6.E.S.} \).

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* Keith Crum

Typed or printed name of signee

Filing Fees:

ार का कुर्दा कुर सुरूक प्रकार र लोको ए अस्पर एका देशांका तथांका तथा विषयं प्राप्त संविद्ध के स्वरंध स्थान है।

& Keiln Crum