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(Re	questor's Name)	
(Ad	dress)	
hA)	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 29, 2021

CRYSTAL MADER RUTTEN 4168 OLD FEDERAL ROAD QUINCY, FL 32351

SUBJECT: CMR PLATNIUM FARMS LLC

Ref. Number: W21000106765

We have received your document for CMR PLATNIUM FARMS LLC, however, upon receipt of your document no check was enclosed. Please return your document along with a check or money order made payable to the Department of State for \$.

no check was enclosed

If you have any further questions concerning your document, please call (850) 245-6052.

Alannah M Carranza Regulatory Specialist II New Filings

2:51

Letter Number: 821A00017809

COVER LETTER

	ration Section on of Corporations		
SUBJECT:	MR Pla Name of Lie	Haras Faras mited Liability Company	<u>LLC</u>
The enclosed Art	ticles of Organization and fee(s) are	submitted for filing.	
Please return all	correspondence concerning this mat	ter to the following:	
_	/)	Name of Petson	utten
		Firm/Company	
	4168 Old	Federal Roc	ul
	Quina	City/State and Zip Code	35/
	E-mail address: (to be used	for future annual report	
notification) For	further information concerning this	·	
\wedge	Name of Person A	·	D245 Number
Enclosed is a ch	eck for the following amount:		
\$125.00 Filing H	Pee \$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	Street Address	
	New Filing Section	New Filing Section	
	Division of Corporations P.O. Box 6327	Division of Corporatio	ns
	Tallahassee, FL 32314	Clifton Building 2661 Executive Center	Circle

RECEIVED JUL 2 - (6)

Tallahussee, FL 32301

ARTICLESOF ORGANIZATIONFORFLORIDALIMITEDLIABILITYCOMPANY
ARTICLE 1 - Name: The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: 4/108 Old Federal Road Same Duay A 323.51
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: (ystal Mader Butter) Name Florida street address (P.O. Box NOT acceptable) City 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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page1 of2

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Curry A 32351
filing: July 20, 2021 (OPTIONAL) ic and cannot be more than five business days prior to or the applicable statutory filing requirements, this date will not be the statutory filing requirements.
mell late
r or an authorized representative of a member. accordance with section 605.0203 (1) (b). Florida Statutes, aformation submitted in a document to the Department of
i

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ -5.00 Certificate of Status (Optional)