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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : MCNEESE LAW FIRM
Account Number : I20190000070
Phone : (850)337-4208
Fax Number : (850)337-4243

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: wjackson@monogramfoods.com

RECEIVED

2021 OCT 26 PM 3:20

FLORIDA LIMITED LIABILITY CO.
Crown of 30A, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

2021 OCT 26 PM 6:17

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COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: CROWN OF 30A, 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:

FRANK W. JACKSON

Name of Person

Firm/Company

8424 Orchard Hill Drive

Address

Germantown, TN 38138

City/State and Zip Code

wjackson@monogramfoods.com

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

For further information concerning this matter, please call:

Frank W. Jackson at (901) 573-0618

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CROWN OF 30A, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

8424 Orchard Hill Drive
Germantown, TN 38138

8424 Orchard Hill Drive
Germantown, TN 38138

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:

RICHARD S. McNEESE

Name

36468 EMERALD COAST PKWY., STE. 1201

Florida street address (P.O. Box NOT acceptable)

DESTIN FL 32541

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..

Richard S. McNeese
Registered Agent's Signature (REQUIRED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

_____ MGR

FRANK W. JACKSON
8424 Orchard Hill Drive
Germantown, TN 38138

_____ MGR

SUZANNE H. JACKSON
8424 Orchard Hill Drive
Germantown, TN 38138

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

ANY LAWFUL PURPOSE

REQUIRED SIGNATURE:

Richard S. McNeese

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.

RICHARD S. McNEESE

Typed or printed name of signer

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)

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