

123000 140 8/8

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

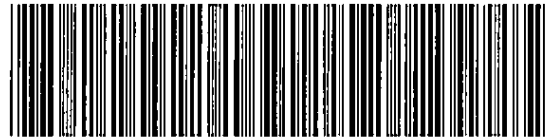
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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C. B. \$125.00

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FBI ALABAMA

D. O'KEEFE
MAR 28 2023

COVER LETTER

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

Crown Land Estates, LLC

SUBJECT: _____
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:

Samuel E. Clark

Name of Person

Crown Land Estates, LLC

Firm/Company

709 SW 2nd Terrace

Address

Dania Beach, FL 33004

City/State and Zip Code

samueleclarkglobal@yahoo.com

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

For further information concerning this matter, please call:

Brittany Allen

904

535-9513

Name of Person

at (_____) _____
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

Street Address

New Filing Section Division
The Centre of Tallahassee

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Crown Land Estates, L.L.C.

(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:

709 SW 2nd Terrace

Dania Beach, FL 33004

Mailing Address:

709 SW 2nd Terrace

Dania Beach, FL 33004

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:

Brittany Allen

Name

709 SW 2nd Terrace

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

Dania Beach

FL

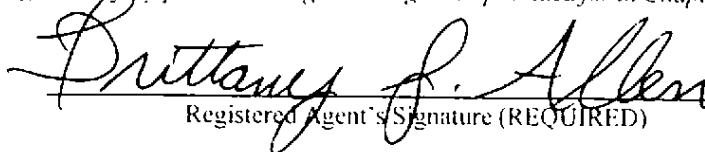
33004

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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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2023 MAR -8 PM 12
ALLIANCE

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:

OWNER

Samuel E. Clark
850 SW 133rd Terr B 312
Pembroke Pines, FL 33027

MGR

Samuel P. Clark
850 SW 133rd Terr B 312
Pembroke Pines, FL 33027

MGR

Kaylen B. Clark
850 SW 133rd Terr B 312
Pembroke Pines, FL 33027

MGR

Jairus K. Clark
850 SW 133rd Terr B 312
Pembroke Pines, FL 33027

(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.

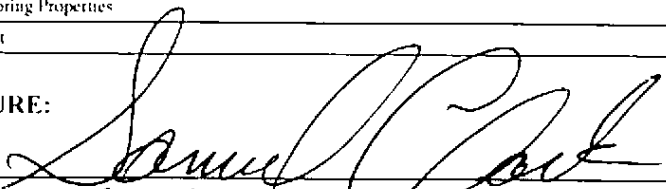
ARTICLE VI: Other provisions, if any.

Residential & Commercial Real Estate Acquisition / Residential & Commercial Real Estate Investment Properties

Residential and Commercial Renovating & Restoring Properties

Residential & Commercial Property Management

REQUIRED SIGNATURE:



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.

Samuel E. Clark

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)

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2023 MAR -8 PM 12:02
TALLAHASSEE, FL
COUNTY CLERK