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(Requestor's Name)					
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COVER LETTER

	New Filing Sec Division of Co						
SUBJECT	Davis Engi	neering Associate	s LLC				
SUBJECT: Name of Limited Liability Company							
The enclo	sed Articles of	Organization and	fee(s) are	e submitted	for filing.		
Please ret	urn all correspo	ondence concernit	ng this ma	tter to the	following:		
	J. Martin Da	vis					
	_			Name of	Person		
	Davis Engine	eering Associates	LLC				
				Firm/Co	mpany		
	17517 Deer	Isle Circle					
				Addr	css		
	Winter Gard	en, Fl 34787					
			C	ity/State an	d Zip Code		
	jmdavispe@g		o be used	for future a	nnual report notificati	on)	
For further	information co	ncerning this mat	ter, please	call:			
J. Martin Davis		40 at (7	383 6905 Daytime Telephon			
	Nam	ne of Person		rea Code	Daytime Telephon	e Number	
Enclosed	is a check for t	he following amo	unt:				
□\$125.00 Filing Fee □\$130.00 Filing Fee & Certificate of Status Mailing Address New Filing Section Division of Corporations P.O. Box 6327			Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	■\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
			,		Street Address		
				New Filing Section Di The Centre of Tallaha 2415 N. Monroe Street	issee		

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Mark and	ssociates LLC			
(Must cont	ain the words "Limited L	iability Company, "l	L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	ddress of the principal off	fice of the Limited L	iability Company is:	
<u>Princips</u>	al Office Address:		Mailing Address:	
17517 Deer Isle Circl	le	PO Bo	x 356	
Winter Garden, Fl 34	7 87	Killarr	nev, FI 34740	
The Limited Liability Company	cannot serve as its own F	Registered Agent. Yo	's Signature: ou must designate an individu	
ARTICLE III - Registered Age The Limited Liability Company another business entity with an a	cannot serve as its own F active Florida registration	Registered Agent. Yo	's Signature: ou must designate an individu	
The Limited Liability Company mother business entity with an a	cannot serve as its own Factive Florida registration address of the registered and J. Martin Davis	Registered Agent. You	's Signature: ou must designate an individu	
The Limited Liability Company inother business entity with an a	cannot serve as its own Factive Florida registration address of the registered and J. Martin Davis	Registered Agent. Yo	's Signature: ou must designate an individu	
The Limited Liability Company inother business entity with an a	cannot serve as its own Factive Florida registration address of the registered and J. Martin Davis	Registered Agent. Your agent are: Name	's Signature: ou must designate an individu	
The Limited Liability Company another business entity with an a	cannot serve as its own Factive Florida registration address of the registered and J. Martin Davis	Registered Agent. You	ou must designate an individu	
The Limited Liability Company mother business entity with an a	cannot serve as its own Factive Florida registration address of the registered and J. Martin Davis 17517 Deer Isle Circle	Registered Agent. You	ou must designate an individu	

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)

ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	J. Martin Davis
	17517 Seer Isle Circle Winter Garden, Fl 34787
	winter Garden, Pt 34787
	
<u> </u>	
f an effective date is listed, the date must be specied date of filing.)	of filing:
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
Dim 7.	
- 11/arm	NWW
Signature of a mer	nber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes.
I his document is execute	information submitted in a document to the Department of State
	felony as provided for in s.817.155, F.S.
	• •
J. Martin Davis	
	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)