

L01000021853

Nov. 2, 2001

Florida Dept. of State
Registration Section
Division of Corporations
PO BOX 6327
Tallahassee, FL 32314

Dear Sirs,

Please file Articles of Organization	\$100.00
Designation of Registered Agent	25.00
Certified Copy	30.00
Certificate of Status	5.00

W01-27847

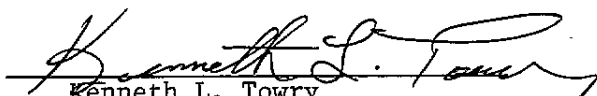
(Check inclosed \$160,00)

Please sent letter of acknowledgment to;

900004702369--3

-12/03/01--01060--004

****160.00 ****160.00


Kenneth L. Towry
1608 Sound Hammock Dr
Navarre, FL 32566
(Phone 850-939-5715)

W42/17

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 DEC 17 PM 3:21

3p



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

December 6, 2001

KENNETH L. TOWRY
1608 SOUND HAMMOCK DR.
NAVARRE, FL 32566

SUBJECT: DOWN PAYMENT ASSISTANCE PROGRAM, LLC
Ref. Number: W01000027847

We have received your document for DOWN PAYMENT ASSISTANCE PROGRAM, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We cannot file two different documents as a single "Articles of Organization." Please submit just one version of your Articles of Organization. The Articles you submit must include the registered agent's designation and acceptance. They must be signed by "a member or authorized representative of a member," not by an "organizer." Finally, the effective date can be no earlier than five business days prior to the filing date, nor can it be more than 90 days after the filing date. The effective date you listed is almost one year in the future.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 701A00064555

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DIVISION OF CORPORATIONS
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Down Payment Assistance Program,
Down Payment Assistance Program, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
1806 Sound Hammock Dr, Navarre, FL 32566

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Kenneth L. Towry
Name
1806 Sound Hammock Dr
Florida street address (P.O. Box **NOT** acceptable)
Navarre FL 32566
City, State, and 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 608, F.S.


Registered Agent's Signature

Article IV - Management (Check box if applicable.)

- ☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)


Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Kenneth L. Towry
Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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