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2006 DEC 12 P 1: 47
SECRETARY OF STATE
ALL AHASSEE, FLORIDA

M DEC 12 P 1:

TRANSMITTAL LETTER

Registration Section

TO:

Divis	ion of Corporations				
SUBJECT:	DONALD MC	DONALD, LLC			
_		f Limited Liability Con	npany)	, , , , , , , , , , , , , , , , , , , ,	-
The enclosed A	Articles of Organization and fee	(s) are submitted for fil	ling.		
Please return a	all correspondence concerning the	his matter to the following	ing:		
	Her	bert J. Buck, Acc	countant		
-	540	5 Jaegal Referson)			
		oles, FL 34109		,	
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		(Firm/Company)		P5 '	
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		44.14		E, FLORIDA	
		(Address)		골 <u>각</u> .	=
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	e de la companya de La companya de la co		i (jamen i dir.) Tarah	May.	
For further info	ormation concerning this matter	, please call:			
Hart	part I Buck Accounta	nt	. (14	. 4244	
Nap	5 Jaeger Rd. lesy#£.084409	at (Area C	ode & Daytime T	elephone Number)	
-			·	• •	
Enclosed is a	check for the following amou	unt:			
\$125,00 Fili	ing Fee 🗇 \$130.00 Filing	Fee & 🗆 \$155.00	Filing Fee &	☐ \$160.00 Filing	Fce,
	Certificate of Statu	is Certified Co	ру	Certificate of Stati	us&
	· · · · · · · · · · · · · · · · · · ·	(additional cor	y is enclosed)	Certified Copy	
•	• .			(additional copy is en-	closed)
	e e e e e e e e e e e e e e e e e e e				
	STREET ADDRESS:	• •	MAILING A	DDDFCC.	
	Registration Section		Registration S		
	Division of Corporations	and property of			
	409 E. Gaines Street	estation and the assessment on the second of	P.O. Box 632		
	Tallahassee, Florida 32399		Tallahassee, F		
	·		,		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liab	ility Company is:	,				
DONALD	MCDONALD, L	LC				
ARTICLE II - Address: The mailing address and street	t address of the pr	incipal o	ffice of the Lin	nited Liabili	ity Com	ipany is:
Principal Office Address:		<u>Mailin</u>	g Address:			
236 Windbrook Court Marco Island, Fl 34 ARTICLE III - Registered A	145	Marc	Windbrook CO Island, Registered	Fl -341	7000 (
The name and the Florida stree	et address of the re	egistered	agent are:	RY OF	12 P	m
DONA	LD MCDONALD	l		.TS		
	· Name				 	
_236 Wi	ndbrook Cou	rt		Þ	_	
	Florida street add	ress (P.O.	Box <u>NOT</u> accepta	ble)		
Marco	City, State, a	FL nd Zip	34145			

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

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager		Name and Address:	
"MGRM" = Manag	ing Member		
MGR		DONALD MCDONALD	
		236 Windbrook Court	
		Marco Island, Fl 34	1145
		·	
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(Use attachment if n	necessary)		DECRETAL CAHA
NOTE: An addition	nal article must be a	dded if an effective date is re	(2).50
11012, 2111 llddiil	and there must be a	aded is all effective date is re-	
REQUIRED SIGN	ATURE:		
	Dordo	Me Donald) I: 47 TATE ORIDA
Sig	gnature of a member or a	n authorized representative of a m	ember.
of	n accordance with section 6 this document constitutes a that the facts stated herein	508.408(3), Florida Statutes, the exec an affirmation under the penalties of are true.)	ution perjury
	DONALD MCDC	ONALD	
	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)

Page 2 of 2

Lisa A Savage / COMMISSION # DD146035 EXPIRES December 18, 2006 BONDED THRU TROY FAIN INSURANCE, INC.