## Deanna L. Huber 313 Foggy Creek Rd. Davenport, Fla. 33837

Phone #

	Office Use Only	
RPORATION NAME(S) & DOCU	MENT NUMBER(S), (if known):	>===N61
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☐ Walk in ☐ Pick up time _	Certifie	d Copy
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IEW FILINGS	<u>AMENDMENTS</u>	الممريم المنتخب
Profit Not for Profit	Amendment Resignation of R.A., Officer/Di	rector v
Limited Liability  Domestication	☐ Change of Registered Agent ☐ Dissolution/Withdrawal	1-00-747
Other	☐ Merger	Name Availability
OTHER FILINGS	REGISTRATION/QUALIFICAT	
Annual Report Fictitious Name	Foreign Limited Partnership	Updaker)
	Reinstatement Trademark	Updner Verifyer
	Other	Acknowledgement
	<b>.</b>	r's Initials



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 30, 2000

DEANNA L. HUBER 313 FOGGY CREEK ROAD DAVENPORT, FL 33837

SUBJECT: DONE FOR YOU Ref. Number: W00000013759

We have received your document for DONE FOR YOU and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "L.C."

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) 487-6020.

Tammi Cline Document Specialist

Letter Number: 400A00030386

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:
Donefor You, L.L.C.
ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:  P.D. Box 584  Loughwan, FL 33858  Loughwan, FL 33858
P.O. Box 584 2505 W. Hwy 54 Loughwan, FL 33858 Loughman, FL 33858
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Deannah Huber PM 8
Name  Name  Name  Name  Florida street address (P.O. Box NOT acceptable)  Significant street address (P.O. Box NOT acceptable)
1000 EN 600 EN 63831 MARIE MAR
City, State, and Zip
Having been named as registered agent and to accept service of process for the above stated inited liability company at the place designated in this certificate, I hereby accept the appointment of 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
Waanaa Hules
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

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)

that the facts stated herein are true.)