Florida Department of State

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Division of Corporations

: (850) 922-4003 Fax Number

From:

Account Name : JAMES SCHWARTZ Account Number : 119990000271 : (727) 441-3334 Phone Fax Number : (727) 441-9395

## LIMITED LIABILITY COMPANY

Dormic, LLC

Certificate of Status	0
Certified Copy	6
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James Schwartz

Feb 04 01 09:18a

#### ARTICLES OF ORGANIZATION OF DORMIC, LLC LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

#### **ARTICLE I - Name**

The name of the Limited Liability Company is:

Dormic, LLC

#### **ARTICLE 11 - Address**

The mailing address and street address of the principal office of the Limited Liability Company

is:

4755 Gulf Boulevard

St. Petersburg Beach, Florida 33706

#### **ARTICLE III - Duration**

The period of duration for the Limited Liability Company shall be perpetual.

#### ARTICLE IV - Management

(Check the appropriate box and complete the statement)

ш	The Limited Liability Company is to be managed by a manager or manage's and the	
	name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:	
×	The Limited Liability Company is to be managed by the members and the name(s) and	
	address(es) of the managing member(s) is/are:	
	Michael Wright	
	4755 Gulf Boulevard	
	St. Petersburg Beach, Florida 33706	

### ARTICLE V - Admission of Additional Members

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be unanimous consent.

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IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this \_\_\_\_\_ day of \_\_\_\_\_\_, 2001.

Michael Wright

Signature of a member executing the Articles of Organization.

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

# CERTIFICATTE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.411 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Dormic, LLC

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

Michael Wright 4755 Gulf Boulevard St. Petersburg Beach, Florida 33706

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.

Michael Wright (Signature)

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