

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

L010000017531

Dependable Vehicle Delivery, LLC

800004631678--4

-10/11/01--01043--011

****125.00 ****125.00

101-22153

Signature _____

Requested by: *SK*

Name _____

10/11/01
Date

11:58
Time

Walk-In _____

Will Pick Up _____

____ Art of Inc. File _____

____ LTD Partnership File _____

____ Foreign Corp. File _____

☒ L.C. File _____

____ Fictitious Name File _____

____ Trade/Service Mark _____

____ Merger File _____

____ Art. of Amend. File _____

____ RA Resignation _____

____ Dissolution / Withdrawal _____

____ Annual Report / Reinstatement _____

____ Cert. Copy _____

☒ Photo Copy _____

____ Certificate of Good Standing _____

____ Certificate of Status _____

____ Certificate of Fictitious Name _____

____ Corp Record Search _____

____ Officer Search _____

____ Fictitious Search _____

____ Fictitious Owner Search _____

____ Vehicle Search _____

____ Driving Record _____

____ UCC 1 or 3 File _____

____ UCC 11 Search _____

____ UCC 11 Retrieval _____

____ Courier _____

01 OCT 11 AM 9:50
STATE OF FLORIDA
TALLAHASSEE
DIVISION OF CORPORATION

RECEIVED
01 OCT 11 PM 12:10
DIVISION OF CORPORATION

10-12-01



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

October 11, 2001

CAPITAL CONNECTION, INC.

SUBJECT: DEPENDABLE VEHICLE DELIVERY, L.L.C.
Ref. Number: W01000023653

We have received your document for DEPENDABLE VEHICLE DELIVERY, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following:

The document must contain the entity's complete mailing address.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6025.

Trevor Brumbley
Document Specialist

Letter Number: 601A00056694

01 OCT 11 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**Article I - Name:**

The name of the Limited Liability Company is:

DEPENDABLE VEHICLE DELIVERY, LIMITED LIABILITY COMPANY

Article II - Address:

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

608 Main Ave., Suite 27, Clermont, Florida 34711

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

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

Howard McCann

Name

608 Main Ave., Suite 27, Clermont, Florida 34711

Florida street address (P.O. Box NOT Acceptable)

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.)

Howard McCann

Typed or printed name of signer

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)

01 OCT 11 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED