## 02000023

## Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H02000194440 2)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : OSSINSKY & CATHCART, P.A.

Account Number : I20010000178 : (407)629-2484

: (407)629-4429 Fax Number

JIVISION OF CORPORATION

## LIMITED LIABILITY COMPANY

DNA DEVELOPERS, L.L.C.

BK

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

HO2000194440 2

## IZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLES OF ORGANIZATION FOR THE COLUMN TO TH
ARTICLE I - Name: The name of the Limited Liability Company is:
DNA DEVELOPERS, L.L.C.
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
6606 Kingspointe Parkway, Orlando, FL 32819
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
CHRISTOPHER C. CATECART
Name
210 N. Wymore Road
Florida street address (P.O. Box NOT acceptable)
Winter Park FL 32789
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.

(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.)

DAVID ROFE Typed or printed name of signee

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

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

Filing Fees:

\$100,00 Filing Fee for Articles of Organization

S 25.00 Designation of Registered Agent

S 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

но2000194440 2