

L020000032000

00789-00623-00671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

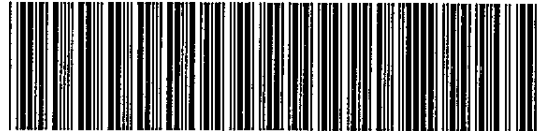
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

~~W02 27063~~

Office Use Only



500009118885

11/26/02--01050--002 \*\*160.00

AND  
FILED  
02 NOV 26 PM 3:17  
RECEIVED  
FBI - TAMPA

VB  
1F27-02

## ADVANCED TAX CENTRE

A Firm of Enrolled Agents  
3819 Murrell Road, Suite E, Rockledge, FL 32955

James A. Naff, EA\*  
E. Ann Shroll, EA\*  
Edward F. Chambers, EA

Phone: (321) 636-8561  
Fax: (321) 631-7208  
E-Mail: [atc777@bellsouth.net](mailto:atc777@bellsouth.net)

Wednesday, November 20, 2002

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee FL 32314

Gentlemen:

Re: D & D Transporting LLC

Enclosed is an original and one (1) copy of the articles and intent to be a Limited Liability Company. Also enclosed is a check in the amount of \$ 160.00 for the filing fees and Certificates for this Limited Liability Company.

Please mail papers to:

Edward Chambers  
Advanced Tax Centre  
3819 Murrell Road, Ste E  
Rockledge FL 32955

Thank you.

Yours truly,

  
Edward Chambers, EA

Enclosures: check  
LLC documents

02 NOV 26 PM 3:17  
AND  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*\* Graduate Fellow of The National Tax Practice Institute  
Member: National Association of Enrolled Agents  
Member: National Society of Accountants  
Member: National Association of Tax Practitioners  
Licensed to Represent Taxpayers at all Administrative Levels of the Internal Revenue Service  
and State Department of Revenue.*

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I – Name

The name of the Limited Liability Company is:

D & D Transporting LLC

## ARTICLE II – Address:

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


3077 Brockett Road  
Mims, FL 32754

## ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Benny L. Dawes  
Name  
3077 Brockett Road  
Florida street and address (P.O. Box **NOT** acceptable)  
Mims, FL 32754  
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.

(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.)

Benny L Dawes  
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)

02 NOV 26 PM 3:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AND  
FILED