

LO300 0002445

CARMICHAEL, CLAY & BARRS, LLC  
CERTIFIED PUBLIC ACCOUNTANTS  
P.O. BOX 2036  
BRUNSWICK, GA 31521  
(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

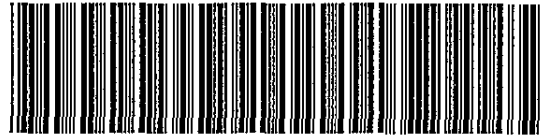
(Business Entity Name)

(Document Number)

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

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01/21/03 12:00 PM  
FILED  
CLERK OF SUPERIOR COURT  
JAN 21 2003

JP  
F22-03

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:  
L. Ray Davis & Associates, LLC

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:  
96039 Lanceford Lane Fernandina Beach, Florida 32034

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

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

L. Ray Davis

Name

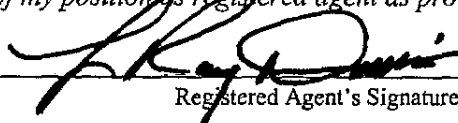
96039 Lanceford Lane

Florida street address (P.O. Box **NOT** acceptable)

Fernandina Beach, FL 32034

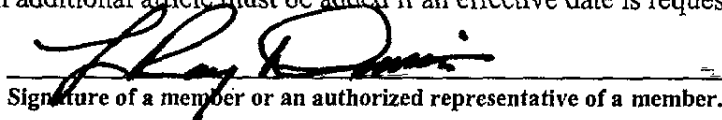
City, State, and Zip

*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

(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.)

L. Ray Davis

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)

03 JAN 21 11:10:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE  
FILED