

L03000022472

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

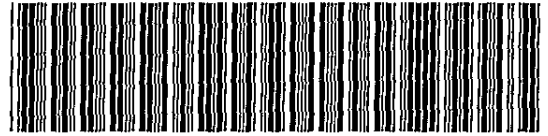
PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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W. P. Verifier	DCC



Law Offices

LINSKY & REIBER

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

Re: BLACK DOVE ENTERPRISES, LLC
File No. 03-608

Gentlemen:

Enclosed is an original and one copy of the Articles of Incorporation for the above company. Please file the original in your offices.

We are enclosing a money order in the amount of \$125.00 for:

\$100.00—Filing Fee
25.00—Registered Agent Fee
\$125.00

Thank you.

Sincerely,

Sam I. Reiber
SIR/cl

enc.

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
BLACK DOVE ENTERPRISES, LLC**

The undersigned hereby certifies that we have associated ourselves for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges and communities of limited liability companies for profit. I further declare that the following Articles shall be the Charter and authority for the conduct of business of said limited liability company.

**ARTICLE I
NAME**

The name of this limited liability company shall be **BLACK DOVE ENTERPRISES, LLC.**

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of this limited liability company shall be at 1604 Meadow Lane, Winter Haven, Florida 33881.

**ARTICLE III
EXISTENCE**

This limited liability company shall be perpetual or until dissolved in a manner provided by law, or as provided in the regulations adopted by the members.

**ARTICLE IV
MANAGEMENT**

Management of this limited liability company is reserved to the following whose name and address is:

Johnnie L. Brokenburr
1604 Meadow Lane
Winter Haven, Florida 33881

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2016 MAR 30
OFFICE OF THE CLERK
STATE OF FLORIDA

IN WITNESS WHEREOF, I have signed the Articles of Organization and acknowledge them this 6/08/03 day of June, 2003.

By: Johnnie L. Brokenburr
Johnnie L. Brokenburr

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

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03 JUN 16 AM 8:30
Tallahassee, Florida

**CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE**


Pursuant to the provisions of Section 608.415 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 **BLACK DOVE ENTERPRISES, LLC.**
2. The name and street address of the registered agent is:

Sam I. Reiber, Esquire
3821 Henderson Boulevard
Tampa, Florida 33639-5013

ACCEPTANCE OF REGISTERED AGENT

Having been named as the registered agent 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. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and is familiar with and accepts the obligations of the position of registered agent.



SAM I. REIBER, Registered Agent

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