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2003 SEP 29 PM 2: 34
2013 SEP 29 PM 2: 34

## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
. SUBJECT: DeBAR INVESTMENTS, LLC. (Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
PATRICIA A. Rhen (Name of Person)	THE CONTRACTOR OF THE STATE OF
DeBAR Investments, LLC. (Firm/Company)	SEE, FLORIDA
2310 CALEDONIAN ST	÷
CLERMONT FL. 34711 (City/State and Zip Code)	
For further information concerning this matter, please call:	

#### STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

## **MAILING ADDRESS:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: DeBAR IN VEST MENTS, LLC.					
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:					
Principal Office Address:  Mailing Address:					
2310 CALEDONIANST DEBAR INVESTMENTS LLC CLEAMONT, FL 34711 P.O. BOX WINTER GARDEN, F 34778-4203					
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:					
The name and the Florida street address of the registered agent are:					
PATRICIA A. RheN  Name  2310 (ALEDONIAN St.  Florida street address (P.O. Box NOT acceptable)  (LERMONT, FL 3471)  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					
Patricia A - Phen Registered Agent's Signature					

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:				
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGR	PATRICIA A Rhen 2310 CALEDONIAN ST. CLERMONT, FL 34711			
MGR	John L. BARTON 400 ORLANDO AVE 11-C OCOEE, FL 34761			
(Use attachment if necessary)				
NOTE: An additional article must be added if an effective date is requested.				
REQUIRED SIGNATURE:				
II ARA				

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.)

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)