

L03000049282

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

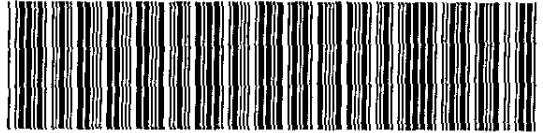
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



100024879561

11/24/03--01050--022 \*\*160.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 NOV 24 PM 12:49

FILED

L03-49282  
OK

**TRANSMITTAL LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ADVANCED DOOR SYSTEMS OF DUNNELLON, 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:

DONALD W RHODES  
(Name of Person)

ADVANCED DOOR SYSTEMS OF DUNNELLON, LLC  
(Firm/Company)

17700 SW 48TH PLACE  
(Address)

DUNNELLON, FL 34432  
(City/State and Zip Code)

For further information concerning this matter, please call:

DONALD W RHODES at ( 352 ) 465-6525  
(Name of Person) (Area Code & Daytime Telephone Number)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 NOV 21 PM 12:49

FILED

**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:

ADVANCED DOOR SYSTEMS OF DUNNELLON, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

17700 SW 48TH PLACE

DUNNELLON, FL 34432

**Mailing Address:**

17700 SW 48TH PLACE

DUNNELLON, FL 34432

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

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

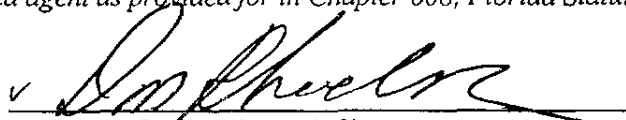
DONALD W RHODES  
Name

17700 SW 48TH PLACE  
Florida street address (P.O. Box **NOT** acceptable)

DUNNELLON FLORIDA 34432  
City, State, and Zip

03 NOV 24 PM 12:49  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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, Florida Statutes..*

  
Registered Agent's Signature

**ARTICLE IV- Manager(s) or Managing Member(s):**

The name and address of each Manager or Managing Member is as follows:

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR

DONALD W RHODES

17700 SW 48TH PLACE

DUNNELLON, FL 34432

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**NOTE: An additional article must be added if an effective date is requested.**

**REQUIRED SIGNATURE:**

  
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.)

DONALD W RHODES

Typed or printed name of signee

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

03 NOV 24 PM 12:49

FILED

**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)

160.00