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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

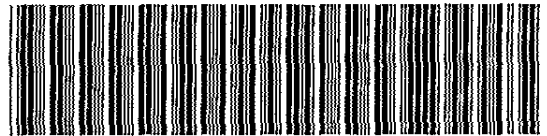
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TALLAHASSEE, FLORIDA

12/11
Just

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: David A. Scott
(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:

David A. Scott
(Name of Person)

David A. Scott
(Firm/Company)

20083 Edgewater Ct.
(Address)

Tallahassee FL 32310
(City/State and Zip Code)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

David Scott at (850) 294-2825
(Name of Person) (Area Code & Daytime Telephone Number)

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:

David A. Scott, 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:

2008 Edgewater Ct.
Tallahassee FL
3230

Same

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

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

David A. Scott

Name

2008 Edgewater Ct.

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

Tallahassee FLORIDA 32310

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, Florida Statutes..

David A. Scott

Registered Agent's Signature

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TALLAHASSEE, FLORIDA

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

David Scott
20083 Edgewater Ct
Tallahassee, FL 32310

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-11-61

Typed or printed name of signee

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