

L04000007530

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

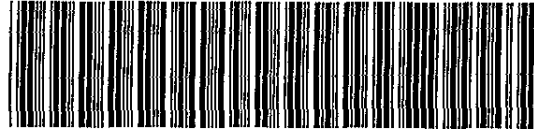
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700026907447

01/21/04--01049--019 **160.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JAN 20 PM 1:30

4201/28/04

cp

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: David K. Stevens 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:

David K. Stevens
(Name of Person)

David K. Stevens LLC,
(Firm/Company)

8231 Ehren Cutoff
(Address)

Land-O-Lakes Fla 34639
(City/State and Zip Code)

For further information concerning this matter, please call:

David K. Stevens at (813) 996-9946
(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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JAN 20 PM 1:31

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

David K. Stevens LLC.

ARTICLE II - Address:

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

Principal Office Address:

8231 Ehren Cutoff

Land-O-Lakes Fla 34639

Mailing Address:

8231 Ehren Cutoff.

Land-O-Lakes

Fla 34639

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

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

David K. Stevens
Name

8231 Ehren Cutoff
Florida street address (P.O. Box **NOT** acceptable)

Land-O-Lakes FLORIDA 34639
City, State, and Zip

04 JAN 20 PM 1:31

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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 K. Stevens
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:

<u>MGR</u>	<u>David K. Stevens</u>
	<u>8231 Ehren Cutoff</u>
	<u>Land-O-Lakes Fla. 34639</u>

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

David K. Stevens
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.)

David K. Stevens
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)

FILED
04 JAN 20 PM 1:31
SECRETARY OF STATE
DIVISION OF CORPORATIONS