

LD4000013105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

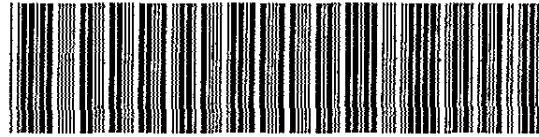
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ILLINOIS
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 FEB 18 PM 1:44

JAMES E. MACK
1321 Saxon Drive
New Smyrna Beach, Fl. 32169
386-426-6448
386-426-5725 fax

January 6, 2004

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

Re: Donovan Hill L.L.C.

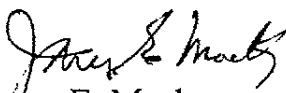
Gentlemen:

Enclosed is an original and one (1) copy of the Articles of Organization for the above named Limited Liability Corporation, together with a check payable to the Division of Corporations in the sum of \$125.00 as your filing fee.

Please file the original and return the copy with the filing marks to the undersigned in the enclosed self-addressed stamped envelope.

Thank you for your assistance.

Very truly yours,


James E. Mack



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

January 13, 2004

JAMES E. MACK,
1321 SAXON DRIVE
NEW SMYRNA BEACH, FL 32169

SUBJECT: DONOVAN HILL INDUSTRIES, L.L.C.
Ref. Number: W04000001712

We have received your document for DONOVAN HILL INDUSTRIES, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6918.

Nanette Causseaux
Document Specialist Supervisor

Letter Number: 704A00002451

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Donovan Hill, L.L.C.
(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:

James E. Mack

(Name of Person)

(Firm/Company)

1321 Saxon Drive

(Address)

New Smyrna Beach, Florida 32169

(City/State and Zip Code)

For further information concerning this matter, please call:

Robert D. Hill

(Name of Person)

at (386)

427-5875

(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

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Donovan Hill Industries, L.L.C.

ARTICLE II - Address:

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

Principal Office Address:

1844 Needle Palm Drive
Edgewater, Florida 32141

Mailing Address:

1844 Needle Palm Drive
Edgewater, Florida 32141

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

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

James E. Mack

Name
1321 Saxon Drive

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

New Smyrna Beach FLORIDA 32169
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..

James E. Mack
Registered Agent's Signature

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DIVISION OF CORPORATIONS
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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

MGR

Name and Address:

Robert D. Hill

1844 Needle Palm Drive
Edgewater, Fl. 32141

(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.)

Robert D. Hill

Typed or printed name of signee

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DIVISION OF CORPORATIONS
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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)