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Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 222-9428

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**LIMITED LIABILITY COMPANY**

**DR Services LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**The name of the Limited Liability Company is: **DR SERVICES LLC****ARTICLE II - Address:**

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

**14157 MYAKKA POINTE DR. PORT CHARLOTTE, FL 33953****ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

C T Corporation System

Name

c/o C T Corporation System, 1200 South Pine Island RoadFlorida street address (P.O. Box NOT acceptable)PlantationFL33324

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.*

By: *Salvina Amenta-Gray*

C T Corporation System

Registered Agent's Signature

**SALVINA AMENTA-GRAY  
SPECIAL ASSISTANT SECRETARY**

(An additional article must be added if an effective date is requested.)

*Rosalie Wilkete*, member

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.)

ROSALIE WILKETE

Typed or printed name of signer

**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)

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