

L04000043786

D.W.D., LLC
P.O. BOX 1629
LADY LAKE, FL. 32158-1629

(City/State/Zip/Phone #)

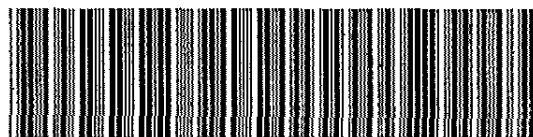
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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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

ARTICLE I – Name:

The name of the Limited Liability Company is:

D.W.D., LLC

ARTICLE II- Address:

The street address of the Principle office of the Limited Liability Company is:

409 S. OLD DIXIE HWY, LADY LAKE, FL. 32159

The mailing address of the Principle office is:

P.O. BOX 1629, LADY LAKE, FL. 32158-1629

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

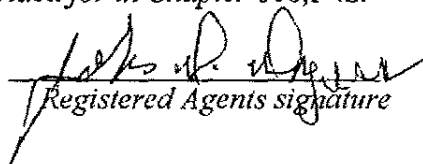
The name and the Florida Street address of the Registered Agent are:

JOHN D. DYESS

409 S. OLD DIXIE HWY

LADY LAKE, FL. 32159

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the 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, I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.


Registered Agents signature

DATE: 05-26-04

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ARTICLE IV- Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

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

ARTICLE V-COMMENCEMENT AND DURATION

This Limited Liability Company shall exist perpetually, commencing on the date of signing.

 DATE: 05-26-04

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 are true.)

JOHN D. DYESS, MEMBER

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

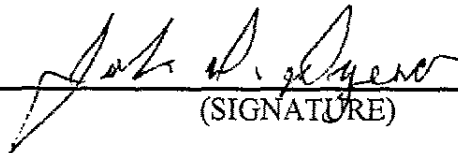
D.W.D. , LLC

2. The name and the Florida address of the registered agent and office

**JOHN D, DYESS
P.O. BOX 1629
LADY LAKE, FL. 32158-1629**

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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 I 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.



(SIGNATURE) DATE: 05-26-04