

L04000044209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

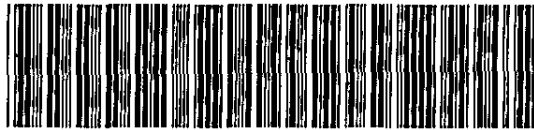
(Document Number)

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04 JUN -9 AM 8:24
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5/19/2004

Corporate Records Bureau
Division of Corporations
Department of State
P.O. Box 6327
Tallahassee, FL 32301

RE: D.D.H. Enterprises, L.L.C.

Dear Sir or Madame:

Enclosed is an original and a copy of the Articles of Organization for the above referenced company.

Also enclosed is our check for \$125.00 to cover the various fees. Please send an acknowledgement of receipt of these funds.

Thank you for your co-operation in this matter.

Sincerely,



David Hefti

04 JUN - 9 AM 8: 24
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: D.D.H. Enterprises, L.L.C.

ARTICLE II - Address:

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

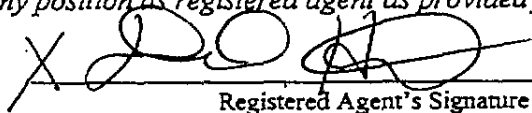
4960 Fruitville Road
Sarasota, Florida 34232

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

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

David Hefti
Name
4960 Fruitville Road
Florida street address (P.O. Box NOT acceptable)
Sarasota FL 34232
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..


Registered Agent's Signature

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)


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 Hefti

Typed or printed name of signee

04 JUN - 9 AM 8:24
SECRETARY OF STATE
DIVISION OF CORPORATIONS

FILING FEES:

- X \$ 100.00 Filing Fee for Articles of Organization
- X \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)