

L04000047430

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

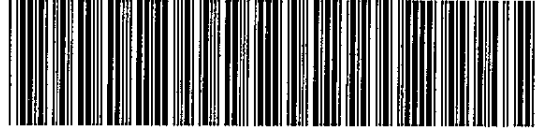
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ADA/DPA Group, 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:

H. Drewry Gores
(Name of Person)

Kohnen & Patton LLP
(Firm/Company)

PNC Center, 201 E. 5th Street, Suite 800
(Address)

Cincinnati, Ohio 45202
(City/State and Zip Code)

For further information concerning this matter, please call:

H. Drewry Gores at (513) 381-0656
(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

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TALLAHASSEE, FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

ADA/DPA Group, LLC

ARTICLE II - Address:

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

Principal Office Address:

14848 Old U.S. Route 41

Suite 14

Naples, Florida 34110

Mailing Address:

14848 Old U.S. Route 41

Suite 14

Naples, Florida 34110

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

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

Thomas B. Haines

Name

3572 Island Walk Circle

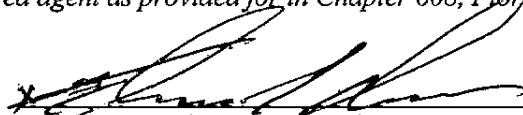
Florida street address (P.O. Box NOT acceptable)

Naples

FLORIDA 34108

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..



Registered Agent's Signature

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The name and address of each Manager or Managing Member is as follows:

SECONDARY UNITS
TALLAHASSEE, FLORIDA

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 8
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 11

Richard M. Holmes

Typed or printed name of signee

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