LO4-0000 55764

(Requestor's Name)
(Address)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
- ARTHUR - CONTRACTOR - CONTRAC
(Document Number)
Certified CopiesCertificates of Status
Special Instructions to Filing Officer:
955, 676, 671 1138 of 1800 Office Use Only
W04-26083

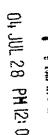


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ORIDA DEPARTMEN

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 8, 2004

MICHAEL C. BERRY SR. 1106 N FORT HARRISON STE. 1 CLEARWATER, FL 33755

SUBJECT: DTL, L.L.C.

Ref. Number: W04000026083

We have received your document for DTL, L.L.C. and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$25.00.

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) 245-6097.

Marsha Thomas Document Specialist

Letter Number: 904A00043787

Division of Compositions - P.O. ROY 6327 - Tallahasson Florida 32314

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: DTL, L. L. C. (Name of Limited Liability Company)	· · · · · · · · · · · · · · · · · · ·
(Name of Landou Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	-
Please return all correspondence concerning this matter to the	he following:
Michael C. Berry, Sr.	
(Name of Person)	
Michael C. Berry & Associates, P. A.	
(Firm/Company)	TAI C
1106 N. Fort Harrison, Suite 1	LLARE
(Address)	28 ASS
	<u>.</u>
Clearwater, Florida 33755	
(City/State and Zip Code)	C 2 2
For further information concerning this matter, please call:	PHI2: 08
Michael C. Berry, Sr. at (727) 447-0533	3
(Name of Person) (Area Code & Daytime T	elephone 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:			
Rapid Appraisals, L. L. C.	#72 0a <u>-</u> 302		
ARTICLE II - Address: The mailing address and street address of the principle.			Company is:
Principal Office Address:	Mailing Address:	· ser	
100 Leeward Islands			
Clearwater, Florida 33767			
_	•	SE	윤
ARTICLE III - Registered Agent, Registered O The name and the Florida street address of the reg Michael C. Berry, Sr., Attorney Name	Office, & Registered Agent' istered agent are:	E.F.0	JUL 2 B PM 12: 08
1106 N. Fort Harrison, Suite 1 Florida street address (P.O. B	Boy NOT arrentable)	- 	
Clearwater, Florida 33755 City, State, and	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 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

Page 1 of 2 (CONTINUED)

The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member **MGRM** Larry Holzer 130 Leeward Island Clearwater, Florida 33767 (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

ARTICLE IV- Manager(s) or Managing Member(s):

that the facts stated herein are true.)

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)