

L04000056884

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Name
Liability

Document

Register

Power
of Attorney

Who's Who

V. P. Verifier

BCC

BCC

BCC

BCC

BCC

Office Use Only



900038338879

07/09/04--01041--008 **105.00

07/30/04--01019--024 **25.00

07/30/04 10:10

Money RA

DUNNELLON EQUITIES, LLC

July 6, 2004

Florida Department of State
Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Filing for Articles of Organization & Certificate of Status

To whom it may concern:

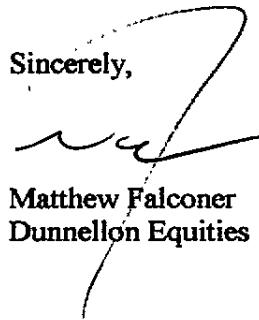
Please find the enclosed Filing for Articles of Organization & Certificate of Status and our check for:

DUNNELLON EQUITIES, LLC
4403 Vineland Rd, Suite B-15
Orlando, FL 32811
Phone 407-650-9100
Fax 407-650-1999

If you should need to contact me, please call the office at phone number 407-650-9100.

Thank you.

Sincerely,



Matthew Falconer
Dunnellon Equities

DUNNELLON EQUITIES, LLC
4403 Vineland Rd, Suite B-15
Orlando, FL 32811
Phone 407-650-9100
Fax 407-650-1999

2004 JUL 6 A 9:40

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DUNNELLO EQUITIES, 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:

MATTHEW FALCONER
(Name of Person)

DUNNELLO EQUITIES, LLC
(Firm/Company)

4403 VINELAND RD, SUITE B-15
(Address)

ORLANDO, FL 32811
(City/State and Zip Code)

For further information concerning this matter, please call:

MATTHEW FALCONER at (407) 650-9100
(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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

July 15, 2004

MATTHEW FALCONER
DUNNELLON EQUITIES, LLC
4403 VINELAND RD., SUITE B-15
ORLANDO, FL 32811

SUBJECT: DUNNELLON EQUITIES, LLC
Ref. Number: W04000027074

We have received your document for DUNNELLON EQUITIES, LLC and your check(s) totaling \$105.00. However, the document has not been filed and is being retained in this office for the following:

You failed to include the registered agent designation fee 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) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 004A00045108

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

DUNNELLON EQUITIES, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4403 VINELAND RD
SUITE B-15
ORLANDO, FL 32811

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

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

MATTHEW FALCONE
Name

4403 VINELAND RD, SUITE B-15
Florida street address (P.O. Box **NOT** acceptable)

ORLANDO, FLORIDA 32811
City, State, and Zip

RECEIVED
JUL 30 A 9:40
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 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

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

MATTHEW FALCOWEK
4403 VINELAND RD, SUITE B-15
ORLANDO, FL 32811

(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 that the facts stated herein are true.)

MATTHEW FALCOWEK
Typed or printed name of signee

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)