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TRANSMITTAL LETTER

	ration Section on of Corporations	
SUBJECT: _	C.M.Dung, LLC (Name of Limited Liability Company)	· ·
The enclosed A	articles of Organization and fee(s) are submitted for filing.	
	Please return all correspondence concerning this matter to the following: Olama (Barran)	·
	(Firm/Company)	
47	244 Hayleigh Dec Drive	
	Tallahassee, FL 32303 (City/State and Zip Code)	新 新 五 五 五 五 五 五 五 五 五 五 五 五 五
For further info	* (City/State and Zip Code) rmation concerning this matter, please call:	ASSEE, F
Chris	Down at (85°) 528.72 (Name of Person) (Area Code & Daytime Telephone Number	839 5 5

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 II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: 4244 Hayleigh Dee Dr. Tallahassee, FL 32303 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Chaisfopher M. Dunn Name 4244 Hayleigh Dee Drive Florida street address (P.O. Box NOT acceptable) Tallahassee FLORIDA 32303	ARTICLE I - Name: The name of the Limited Liability Company is: C. M. Dupp, LLC
4244 Hayleigh Dee Dr. 4244 Hayleigh Dee Dr. Tallahassee, FL 32303 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature? The name and the Florida street address of the registered agent are: Christopher M. Dunn Name 4244 Hayleigh Dee Drive Florida street address (P.O. Box NOT acceptable)	
The name and the Florida street address of the registered agent are: Christopher M. Dunn Name 4244 Hayleigh Dee Drive Florida street address (P.O. Box NOT acceptable)	4244 Hayleigh Dee Dr. 4244 Hayleigh Dee Dr Tallahassee, FL Tallahassee, FL
FLORIDA 32303	

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 privided for in Chapter 608, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managir The name and address of each Manager	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Christopher M Dunn 4244 Hoybeigh Dec Dr Tullahussea, Feb 32303
(Use attachment if necessary)	
NOTE: An additional article must be REQUIRED SIGNATURE: Signature of Amember or a fair	TARY OF SHEET
(In accordance with section 608. of this document constitutes an a that the facts stated herein are true.)	408(3), Florida Statutes, the execution ffirmation under the penalties of perjury

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)