

L040000086836

2004 Dec 17 P 1:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

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(Business Entity Name)

(Document Number)

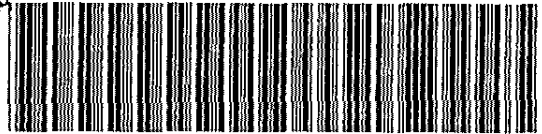
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W04-35185

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FILED

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

2004 Dec 1 P 1:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

September 22, 2004

MARK W. DEXTER  
331 PINAPPLE ST.  
TARPON SPRINGS, FL 34689

SUBJECT: MARK W. DEXTER L.L.C.  
Ref. Number: W04000035185

We have received your document for MARK W. DEXTER L.L.C. and your check(s) totaling \$135.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6094.

Agnes Lunt  
Document Specialist

Letter Number: 704A00055916

TRANSMITTAL LETTER

FILED

TO: Registration Section  
Division of Corporations

2004 Dec. 1 P 1:40

SUBJECT: Mark W. Dexter L.L.C.  
(Name of Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mark W. Dexter  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

331 Pineapple St.  
(Address)

Tarpon Springs Fl. 34689  
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark W. Dexter at (727) 804-1892  
(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

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

**FILED**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

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Mark W. Dexter L.L.C.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE II - Address:**

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

**Principal Office Address:**

331 Pineapple St.  
Tarpon Springs Fl.  
34689

**Mailing Address:**

331 Pineapple St.  
Tarpon Springs Fl.  
34689

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

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

Mark W. Dexter  
Name

331 Pineapple St.  
Florida street address (P.O. Box **NOT** acceptable)

Tarpon Springs FLORIDA Fl.  
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

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

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

**FILED**

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

~~None~~ MGRM

Mark W. Dexter  
331 Pineapple St.  
Tarpon Springs FL 34689

(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.)

Mark W. Dexter  
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)