

L05000015992

Davis Bros, LLC
3048 4th St
St Aug, FL
32084

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

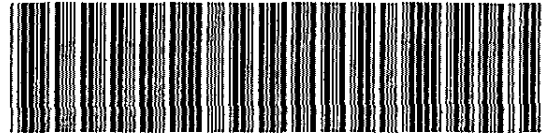
(Business Entity Name)

(Document Number)

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02/14/05--01050--001 **72.50

01/26/05--01032--009 **87.50

FILED
2005 FEB 14 PM 2:20
CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

J. BROWN FEB 16 2005

+ 87.50 New
amt.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

January 31, 2005

JAMES R DAVIS
3048 4TH ST
ST AUGUSTINE, FL 32084

SUBJECT: DAVIS BROTHERS, LLC
Ref. Number: W05000004945

Articles of Org.
+ copies
160

- 87.50

\$72.50

Organization
Limited Llc

We have received your document for DAVIS BROTHERS, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please list the complete address for the incorporator in Article VII.

Please return the original and one copy of 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) 245-6855.

Tammy Hampton
Document Specialist
New Filings Section

Letter Number: 205A00006765

per our conversation -

RECEIVED
05 FEB 11 PM 3:46
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Davis Brothers, 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:

Melanie D Davis
(Name of Person)

Davis Brothers, LLC
(Firm/Company)

3048 4th St
(Address)

St Augustine, FL 32084
(City/State and Zip Code)

For further information concerning this matter, please call:

Melanie D Davis at 904, 501-4747
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Davis Brothers, LLC.

ARTICLE II - Address:

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

Principal Office Address:

3048 4th St.
St Augustine
FL 32084

Mailing Address:

Jane

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

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

Melanie D Davis
Name

3048 4th St.
Florida street address (P.O. Box **NOT** acceptable)
St. Augustine FL 32084
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, F.S..

Melanie D Davis
Registered Agent's Signature

(CONTINUED)

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JALLAHASSEE COUNTY FLORIDA

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:

Mgr.

James R. Davis
3048 4th St
St Augustine, FL 32084

Mgr

Burton I Davis
3095 Monument Av
St Augustine 32095

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CLERK OF SUPERIOR COURTS
PALM BEACH COUNTY, FLORIDA

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Melanie D Davis
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.)

Melanie D. Davis
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)