Division of Corporations Public Access System

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TO:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : RICHARD G. COKER, JR., P.A.

Account Number : T20010000145 Phone : (954)761-3636 Fax Number : (954)761-1818

HAIR -LE AM 7: 52 HSION OF CORPORATION

## LIMITED LIABILITY COMPANY

DOK, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125,00

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
DOK, LLC	
JON, LLO	
ARTICLE II - Address:	
	principal office of the Limited Liability Company is:
	remorphis company is.
Principal Office Address:	Mailing Address:
1645 Southeast 3rd Court	Same
Admiral Building, Suite 214	,
Deerfield Beach, FL 33441	<u> </u>
ARTICLE III - Registered Agent, Register	red Office, & Registered Agent's Signature
The name and the Florida street address of th	e registered agent are:
Richard G. Coker, Jr., Esqui	ent in the second of the secon
Nar	<del></del>
	<u>ଥିଲି ଫ</u>
1404 South Andrews Avenu	
Florida street:	address (P.O. Box <u>NOT</u> acceptable)
Fort Lauderdale	FT.
City, State	e, 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.

Registered Agent's Signature

(CONTINUED)

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03/04/2005 FRI 16:31 FAX 954 761 1818 COKER & FEINER H05000054930 3

> ARTICLE IV-Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Mcmber	Name and Address:		
MGRM	William F. Thies		
	1645 Southeast 3rd Court, Admiral Bidg., #214	-	
	Deerfield Beach, FL 33441	- -	
~		=	
		<b>-</b>	
		_	
		-	
		-	
		-	
(Use attachment if necessary)		ر اسر سر مسر	8
NOTE: An additional article must	be added if an effective date is requested.		8 A. A.
REQUIRED SIGNATURE:			10 m
William	_ ( )		
Signature of a member	e or an authorized representative of a member.	<b>:</b> ^	:2
	rden 608.408(3). Fiorida Statutes, the execution tutes an affirmation under the penalties of perjuty terrin ste true.)		· S
William F. Thies			
Ty	ped or printed game of signes		

Filing Rees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.04 Certificate of Status (Optional)

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