

L05000023072

Mark S. Davis

Carpentry-Remodeling-Repairs  
PO Box 08429  
Fort Myers, Florida 33908

(Address)

(City/State/Zip/Phone #)

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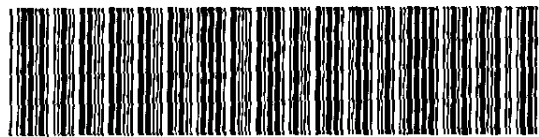
(Business Entity Name)

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L03/08/05

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**ARTICLES OF ORGANIZATION  
OF  
Mark S. Davis Carpentry LLC**

**ARTICLE I            NAME**

The name of the limited liability company shall be: **Mark S. Davis Carpentry LLC**

**ARTICLE II           PRINCIPAL OFFICE**

The principal place of business and mailing address of this Limited Liability Company shall be: PO Box 08429 , Fort Myers, Florida 33908.

**ARTICLE III           INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: Mark S. Davis, 15119 Ports of Iona Drive, Fort Myers, Florida 33908. Located in the County of Lee.

**ARTICLE IV           DURATION**

The duration for the limited liability company shall be: 12/31/2045.

**ARTICLE V           MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Mark S. Davis, PO Box 08429 , Fort Myers, Florida 33908



Mark S. Davis Carpentry

Prepared by Mark S. Davis Carpentry, PO Box 08429 , Fort Myers, Florida 33908  
239-994-5347

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CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,  
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE  
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN  
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE  
STATE OF FLORIDA.

The name of the limited liability company is: **Mark S. Davis Carpentry** LLC  
15119

The name and address of the registered agent and office is Mark S. Davis, Ports of Iona Drive,  
, Fort Myers, Florida 33908. Located in the County of Lee.

Having been named as registered agent and to accept service of process for the above  
stated 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.

Signature: \_\_\_\_\_

*Mark S. Davis*

*Mark S. Davis*

Date: \_\_\_\_\_

*3.1.05*

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