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TRANSMITTAL LETTER

TO:	Registration Sec Division of Cor							
SUBJI	ECT: WILLIAM	J DODSON LLC (Name of Limite	d Liability Compar	ıy)		 -		
The en	closed Articles of	Organization and fee(s) are s	submitted for filing.					
Please	return all correspo	ondence concerning this matte	er to the following:					
	WILLIAM	J DODSON	·		<u>`</u>			
		(Name of Person)					
		(Firm/Company)				_	
	P O BOX 79	2						
			(Address)					
	AVAH	NA, FL 32333	-			3	3	
		(City	/State and Zip Code)		- An	<u></u>	_ _	*** *********************************
For fur	ther information o	concerning this matter, please	call:		About		05 JUN 23 PM 3:56	
WILL	AM J DODSON		at (850)	893-5546	Ţ	HC: TI/2	≚ د،	<u>يَّةً</u> نيع نيع
	(Name	of Person)	(Area Code	& Daytime Te	lephone Number)	REID.	95.	•
Enclos	sed is a check for	r the following amount:				Les.		
5 \$125	5.00 Filing Fee	Ø \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Fill Certified Copy (additional copy is	Ū	☐ \$160.00 Fi Certificate of Certified Cop (additional copy	Status by	&	
	Registo Divisio 409 E.	ET ADDRESS: ration Section on of Corporations Gaines Street assee, Florida 32399	R D P	AAILING AI Legistration Se Division of Co O. Box 6327 allahassee, Fl	ection rporations			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:
William J. Dodson, LLC	
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1035 Qodesh Lane	PO Box 792
Tallahassee, Fl 32312	Havana, Fl 32333
ARTICLE III - Registered Agent, Regist The name and the Florida street address of William J Dodson	
	lame LLC 05
1035 Qodesh Lane	AF & 1
Florida stree	et address (P.O. Box NOT acceptable)
Tallahassee,	FL 32312
City, S	tate, and Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and comple accept the obligations of my position as	d to accept service of process for the above stated lighted d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S

(CONTINUED)

Page 1 of 2

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

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

Title: "MGR" = Mana, "MGRM" = Ma	ger	and Address:			
MGR	William	J Dodson			
	Po Box	792			
	Havana	, FL 32333			
••••					
					
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	·				
(Use attachment	if necessary)				
(Ose attachment	ii necessary)	=	⊒.	_	
NOTE: An add	itional article must be added if	an effective date is requested			
BEATTBER CI	CINI A TPU IDIFI.		AL S	=	
REQUIRED SI	GNATURE:		AST C	<u>ာ</u>	rince.
	47 11. 00	Dalla .	SEE		ITI
	Signature of a member or an author	rized representative of a member.	Ξ.	ယ္	
	(In accordance with section 608.408() of this document constitutes an affirm that the facts stated herein are true.)	3), Florida Statutes, the execution nation under the penalties of perjury	FLORID	PM 3: 56	
	William J. Do	dson			

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)