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| (Re | questor's Name) | |
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| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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SECRETARY OF STATE AS DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

| rporations | | | |
|---|---|--|--|
| DVW Hole | lings, LLC | | |
| | | - | |
| f Organization and fee(s) are s | ubmitted for filing. | | |
| ondence concerning this matte | er to the following: | | |
| | | | |
| C | Name of Person) | | |
| | | | |
| (| Firm/Company) | | |
| 1372 | 9 SW 4th Lane | | |
| | (Address) | | |
| Newbe | rry, Florida 32669 | | |
| (City) | State and Zip Code) | | |
| concerning this matter, please | call: | | |
| V. Vaughn | at (352331-7584 | | |
| or rerson) | (Area Code & Daytime T | elephone Number) | |
| r the following amount: | | | |
| \$130.00 Filing Fee & Certificate of Status | ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | |
| ET ADDRESS: | MAILING A | | |
| Registration Section Division of Corporations | | Registration Section Division of Corporations | |
| Gaines Street | P.O. Box 632 | | |
| | DVW Hole (Name of Limite) FOrganization and fee(s) are sometime concerning this matter. Ry Oxider Concerning this matter. Newber (City) Concerning this matter, please V. Vaughn of Person) The following amount: The following amount: | DVW Holdings, LLC (Name of Limited Liability Company) FOrganization and fee(s) are submitted for filing. ondence concerning this matter to the following: Ryan W. Vaughn (Name of Person) DVW Holdings, LLC (Firm/Company) 13729 SW 4th Lane (Address) Newberry, Florida 32669 (City/State and Zip Code) concerning this matter, please call: V. Vaughn of Person) at (352 331-7584 of Person) r the following amount: The following amou | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| office of the Limited Liability Company is: |
|--|
| office of the Limited Liability Company is: |
| office of the Limited Liability Company is: |
| |
| ng Address: |
| · · |
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| |
| & Registered Agent's Signature: OS SECRETARY OF CREATING OF CREAT |
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| PH RFOR |
| Box NOT acceptable) |
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| ×. |

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)

Page 1 of 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 Member | Name and Address: | | | |
|--|--|--|--|--|
| MGRM | Ryan Vaughn | | | |
| | 13729 SW 4th Lane | | | |
| | Newberry, Florida 32669 | | | |
| MGRM | Kim Vaughn | | | |
| | 13729 SW 4th Lane | | | |
| | Newberry, Florida 32669 | | | |
| MGRM | Kenneth Wooten | | | |
| | 1108 Oak Pond Drive | | | |
| | Celebration, Florida 34747 | | | |
| MGRM | Renee Wooten | | | |
| | 1108 Oak Pond Dr. | | | |
| | Celebration, Florida 34747 | | | |
| (Use attachment if necessary) NOTE: An additional article must be | e added if an effective date is requested. | | | |
| REQUIRED SIGNATURE: | | | | |
| Regun | w. Ula | | | |
| Signature of a member or an authorized representative of a member. | | | | |
| (In accordance with section | on 608.408(3), Florida Statutes, the execution | | | |

Filing Fees:

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

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

DIVISION OF CORPORATION

of this document constitutes an affirmation under the penalties of perjury

Ryan W. Vaughn

Typed or printed name of signce

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" = Ma "MGRM" = N | nager Managing Member | Name and Address: | |
|-------------------------------------|---------------------------------------|--|---------------------|
| MGRM | | Sean Donahoo | |
| | · · · · · · · · · · · · · · · · · · · | 16112 Muirfeld Drive | |
| | | Odessa, Florida 33556 | |
| MGRM | | Jodie Donahoo | |
| <u></u> | | 16112 Muirfield Drive | |
| | | Odessa, Florida 33556 | · · |
| | | | |
| | - | | |
| | | | |
| | | | - |
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| | | | |
| (Use attachme | ent if necessary) | | |
| NOTE: An a | dditional article must | be added if an effective date is requested. | |
| | | | 05 DIV |
| REQUIRED | SIGNATURE: | | |
| | | | F 25 |
| | \mathcal{L} | 11/1/2 | os Jul 15 |
| | Signature of a membe | r or an authorized representative of a member. | PA PC |
| | | ction 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.) | OS JUL 15 PM 12: 59 |
| | | Ryan W, Vaughn | |
| | Ty | ped 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)