

L05000074161

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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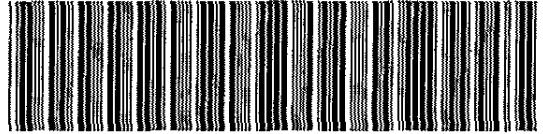
(Business Entity Name)

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Clark & Clark Income Tax Service
228 S. Courtenay Parkway, Suite 2
Merritt Island, FL 32952

REGISTRATION SECTION
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P O BOX 6327
TALLAHASSEE, FL 32314

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE 1- NAME

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

DDS INVESTMENTS LLC

ARTICLE II - ADDRESS

THE MAILING ADDRESS AND STREET ADDRESS OF THE PRINCIPAL OFFICE OF THE LIMITED LIABILITY COMPANY IS:

PRINCIPAL OFFICE ADDRESS

MAILING ADDRESS

504 S MIRAMAR STREET
INDIALANTIC, FL 32903

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT'S SIGNATURE:**

THE NAME AND THE FLORIDA STREET ADDRESS OF THE REGISTERED AGENT IS:

DENNIS SCHERMOCK

504 S MIRAMAR STREET

INDIALANTIC, FL 32903

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 AGENTS SIGNATURE

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ARTICLE IV - MANAGER(S) OR MANAGING MEMBER IS AS FOLLOWS:

THE NAME AND ADDRESS OF EACH MANAGER OR MANAGING MEMBER IS AS FOLLOWS:

TITLE: NAME & ADDRESS
"MGR"= MANAGER
"MGRM= MANAGING MEMBER

MGR DENNIS SCHERMOCK
504 S MIRAMAR STREET
INDIALANTIC, FL 32903

MGRM ROBERT K DUNCAN
385 PENTLAND DR
MELBOURNE BEACH FL 32951

MGRM. CAROLYN H DUNCAN
385 PENTLAND DR
MELBOURNE BEACH FL 32951

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NOTE: AN ADDITIONAL ARTICLE MUST BE ADDED IF AN EFFECTIVE DATE IS REQUESTED.

REQUIRED SIGNATURE:

x 

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.)

DENNIS SCHERMOCK
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)