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(Requ	estor's Name)	
(Addre	ess)	
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(City/S	State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filling Officer:		
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SEGRETARY OF STATE OF STATE OF CORPORATIONS
05 JUL 27 AM 11: 28

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations
SUBJECT: DT HARS LAND CONSULTANTS, LLC. (Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
DAUN JENNIER (Name of Person)
DJ HAAS LAND CONSULTANTS ILLC. (Firm/Company)
3141 CHASE CIR (Address)
SAPASOTA, FLA 34231 (City/State and Zip Code)
For further information concerning this matter, please call:
DAUN JENNISK at (407) 383 · 5865 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{Status} \text{Status} \text{Status} \text{Status} \text{Status} \text{Status} \text{Certified Copy} \text{(additional copy is enclosed)} \text{Status} \text{Certified Copy} \text{(additional copy is enclosed)}
STREET ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company	is:	
DT HAAS LAND CONSU	HANTS ILLC.	 -
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liabili	ity Company is:
•		
Principal Office Address:	Mailing Address:	
3141 CHASE CIR	3141 CHASE CIR	
SARASOTA, FL 34231	SARZASOTA, FL 34Z	3[
ARTICLE III - Registered Agent, Registe	red Office, & Registered Agent's Sig	gnature:
The name and the Florida street address of the	ne registered agent are:	
DAUN JENNIBR		95
	me	
3141 CHASE	CIR	SECRETARY NVISION OF CO 05 JUL 27
Florida street	address (P.O. Box NOT acceptable)	₹ ₹

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

City, State, and Zip

(CONTINUED)

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

SALASOTA, FL 34231	<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM DANN JENNIER 3141 CHASE CIR SARASOTA, FL 34731	Merm	
SALASOTA, FL 34231		SHEASOTA, FLEYES
SARASOTA, FL 34231	MERM	
(Lice attachment if necessary)		3141 CHASE CIR SARASOTA, FL 34231
(Lice attachment if necessary)		
(Lice attachment if necessary)		
(Lice attachment if necessary)		
(Lise attachment if necessary)		
	(Lise attachment if necessary)	

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

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.)

KOBERT HAAS

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)