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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 SEP 28 PM 9:08 PM 12:58

FILED

**David Brian Clark
3712 Foxford Circle
Tallahassee, FL 32309
850.322.6188**

September 28, 2005

Secretary of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Gentleman/Madam:

Enclosed please find the Articles of Incorporation to be filed with the Department of State for Fuel Design Group, LLC.

Also enclosed is a check in the amount of One Hundred Sixty Dollars for the cost of the filing fee, certificate of status, and certified copy.

Thank you for your time and effort in this matter. If you have any questions, please do not hesitate to call.

Sincerely,



David Brian Clark

enclosures

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 SEP 28 PM 1:00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Fuel Design Group, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

3712 Foxford Circle
Tallahassee FL 32309

Mailing Address:

3712 Foxford Circle
Tallahassee FL 32309

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

David Brian Clark

Name

3712 Foxford Circle

Florida street address (P.O. Box **NOT** acceptable)

Tallahassee FL 32309

City, State, and Zip

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.

David Brian Clark

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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05 SEP 28 11:00 AM
TALLAHASSEE, FL 32309
SECRETARY OF STATE

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

David Brian Clark
3712 Foxford Circle
Tallahassee FL 32309

MGRM

Sherrie Diane Clark
3712 Foxford Circle
Tallahassee FL 32309

MGRM

Laura Alice Dixon
2000 North Meridian Rd, Apt 105
Tallahassee FL 32303

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

David Brian Clark

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.)

David Brian Clark

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)

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05 SEP 28 PM 1:01
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TALLAHASSEE, FLORIDA