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(Requestor's Name)
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## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 17, 2005

DENNIS HARRIS P.O. BOX 272 KEYSTONE HEIGHTS, FL 32656

SUBJECT: D & L LANDCLEARING LLC

Ref. Number: W05000051501

We have received your document for D & L LANDCLEARING LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 905A000681

## COVER LETTER

•	•			
TO: Registration Se Division of Co				
SUBJECT:	L Landle	aring LC d Liability Company)		
	(I tame of Dames	d Diability Company)		
The enclosed Articles of	f Organization and fee(s) are su	abmitted for filing.		
Please return all corresp	ondence concerning this matte	r to the following:		
	lennis t	Jarris		
	th.	Name of Person)		
Du	Llanddeg	ENN Q Ø LL	<u>.</u>	
20 R	lov 323			
		(Address)		
Kaysto	ne Nots	State and Zip Code)		
•	- (City/	State and Zip Code)		
For further information of	concerning this matter, please of	all:		
Donnis (Name	Harris of Person)	at (352) 235 (Area Code & Daytime Tel	ephone Number SS	
Enclosed is a check fo	r the following amount:		DEC -	Canada 2
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status Certified Copy (additional copy if enclosed)	
	Mailing Address	Street/Courier Address		

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "Limited Company" for 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:

Mailing Address:

Principal Office Address:

1536 Charlotte Pol

Keystone Wats Fl 32656

Mensione tols It 87656

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:

Donald

Name

6415 Anifoch t

Florida street address (P.O. Box NOT acceptable

Kerstone

City, State, and Zip

2005 DEC : SECRETAL TALLAHAS

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 growth with 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 Change 698. F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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	Name and Address:
"MGRM" = Managing Member	Dennis Harris PD Box 272 Keystone Hots, FL 32656
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be prior to or 90 days after the date of filing.)	ate of filing: (OPTIONAL)  ne specific and cannot be more than five business days
REQUIRED SIGNATURE:	•
Signature of a member of	or an authorized representative of a member.
(In accordance with section of this document constitute that the facts stated here	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury in are true.)
Derwis	Some of signed
Filing Fees:	E.F.S PA
S125.00 Filing Fee for Articles of Organiz of Registered Agent S 30.00 Certified Copy (Optional)	
\$ 5.00 Certificate of Status (Optional)	