

60000018864

Dominic & Connie Terry  
(Requestor's Name)

211 Manna Way  
(Address)

(Address)

Sylva, NC 28779  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

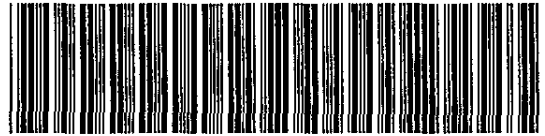
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M. HODGES

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

DAT/CAT Properties LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

211 Manna Way

Sylva NC, 28779-6623

**Mailing Address:**

211 Manna Way

Sylva NC, 28779-6623

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

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

Gary Carlisle

Name

445 N.E 55th Street

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

Miami,

FLORIDA 33137

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, Florida Statutes..*

*Signed* (see Attached)

Registered Agent's Signature

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FOR  
FLORIDA LIMITED LIABILITY COMPANY**

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Sylva, NC 28779-6623

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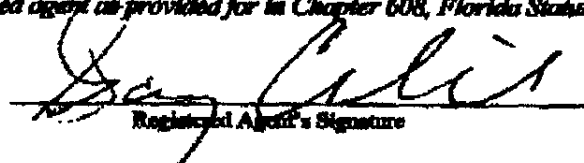
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Registered Agent's Signature

**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

Dominic Angelo Terry

211 Manna Way

Sylva NC, 28779-6623

MGRM

Constance Ann Terry

211 Manna Way

Sylva NC, 28779-6623

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:**

Constance Ann Terry  
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.)

Constance Ann Terry

Typed or printed name of signee

**Filing Fees:**

\$100.00 Filing Fee for Articles of Organization ✓

\$ 25.00 Designation of Registered Agent ✓

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)