106000038673

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
Į.		



100069909221

114/15/06

OF APR 12 PM 4: 46

Office Use Only

JERYAN LPR 1 7 2006

J. BRYAN APH 1.4 2006

TRANSMITTAL LETTER

TO: Registration Section

Division of Corporations

DATE: 4-6-06

SUBJECT:

DIGITAL TRANSCRIPTION SOLUTIONS, LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kelly DeLattre P.O. Box 395 Oakland, FL 34760

For further information concerning this matter, please call:

Kelly DeLattre at (407) 579-2500

Enclosed is a check for the following amount:

- □ \$125.00 Filing Fee
- □ \$130.00 Filing Fee & Certificate of Status
- □ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- □ \$160.00 Filing Fee, Certificate of Status & Certified Copy (add'l copy enclosed)

STREET ADDRESS:

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

MAILING ADDRESS:

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



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY TO THE PROPERTY OF THE PROPERT

ARTICLE I - Name

The name of the Limited Liability Company is:

Digital Transcription Solutions, 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:

P.O. Box 395

P.O. Box 395

Oakland, FL 34760

Oakland, FL 34760

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

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

Kelly DeLattre 716 Largovista Drive Oakland, Florida 34760

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 against 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 provided for in Chapter 608, F.S.,

ARTICLE IV – Manager(s) or Managing Member(s)

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" =- Managing Member

MGRM

Kelly DeLattre 716 Largovista Drive Oakland, FL 34787

ARTICLE V – Effective Date

Digital Transcription Solutions, LLC shall be effective as of April 15, 2006.

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.)

KELLY DeLATTRE (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)

OF APR 12 PM 4: 46