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SECRETARY OF STATE DIVISION OF CORPORATIONS

EFFECTIVE DATE



COVER LETTER

Division of Corporations		
SUBJECT: DJSD (Dollars Just Start	Doubling), LLC	
	ed Liability Company)	
The enclosed Articles of Organization and fee(s) are s	submitted for filing.	
Please return all correspondence concerning this matter	er to the following:	_
Laura D. Stokes		2006 JUN 21 PM 3: 57
((Name of Person)	SE OFF
DJSD (Dollars Just Start Do	oubling), LLC	21
	(Firm/Company)	7
P. O. Box 984		မှ က
	(Address)	: نڌ
Panama City, FL 32402		
	/State and Zip Code)	
For further information concerning this matter, please	call:	
Laura D. Stokes	at (850) 763-8757	
(Name of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	s &
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address 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	3:	
DJSD (Dollars Just Start Doubling), LLC	1. I.G	
Must end with the words "Limited Liability Company, "Lim	ited Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Com	pany is:
Principal Office Address:	Mailing Address:	
2523 Business 98	PO Box 984	
Panama City, FL 32401	Panama City, FL 32402	
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regi business entity with an active Florida registration.) The name and the Florida street address of the Laura D. Stokes	registered agent are:	SECRETARY OF STATE DIVISION OF CORPORATIONS 21 PM 3: 57
Name	e	로 ^유
4616 Park Street	Č	STA STA
	ddress (P.O. Box NOT acceptable)	STATE RATIONS
Parker,	FL 32404	- 10
City, State,		
registered agent and agree to act in this capaci statutes relating to the proper and complete p	this certificate, I hereby accept the appointme	ent as ens of all ith and

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)



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

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

MGR	Laura D. Stokes	
	PO Box 1014	
	Panama City, FL 32402	
MGRM	Daniel W. Davis II	2006 JUN 2 1
	PO Box 35307	
	Panama City, FL 32412	
		=
		<u> </u>

		3: 5 <u>7</u>
		
		±
		
(Use attachment if necessary)		
	<u> </u>	(OPTIONAL
days after the date of filing.)	st be specific and cannot be more than five b	usiness days
days after the date of ming.		

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.)

Laura D. Stokes

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)