# Florida Department of State

Division of Corporations **Public Access System** 

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To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name

: CLARION VENTURES, INC.

Account Number : I20030000026

Phone

: (623) 465-8636

Fax Number

: (623)465-8640

•	Dove Building & D	esign LLA
Cert	ificate of Status	0
Cert	ified Copy	0
Page	e Count	OI
Esti	mated Charge	\$125.00

Corporate Filing Menu

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## ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

Dove Building & Design LLC		
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited Liability Company	
Principal Office Address:	Mailing Address:	
906 S.W. Bayshore Blvd.	906 S.W. Bayshore Blvd.	
Port Saint Lucie Florida, 34983	Port Saint Lucie Florida, 34983	
ARTICLE UI - Registered Agent, Register The name and the Florida street address of t	ered Office, & Registered Agent's Signature: he registered agent are:	
	he registered agent are:	
The name and the Florida street address of t  John Cuthrell	he registered agent are:	
The name and the Florida street address of t  John Cuthrell  No.  906 S.W. Bayshore Blvd.	he registered agent are:  ACCALLANA  AND ACCALLANA	
The name and the Florida street address of t  John Cuthrell  No.  906 S.W. Bayshore Blvd.	he registered agent are:	
The name and the Florida street address of t  John Cuthrell  No.  906 S.W. Bayshore Blvd.	he registered agent are:  Authorized Agent are:	
The name and the Florida street address of t  John Cuthrell  No.  906 S.W. Bayshore Blvd.  Florida street address  Port Saint Lucie.	the registered agent are:  ACCOMMENT ASSET TO SECURITY OF SECURITY	

Page 1 of 2 (CONTINUED)

Registered Agent's Signature

((( Ho 6000168452 3)))

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

((( HO6000 168452 3)))

The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM John C. Cuthrell 810 S.W. Ivanhoe Drive Port Saint Lucie Florida., 34983 MGRM Patrick L. Silas, Jr. 4811 N.E. Savannah Road Jensen Beach Florida, 34953 MGRM **Emilien Louis** 560 S.W. Haldon Avenue Port Saint Lucie Florida, 34953 (Use attachment if necessary)

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

**REQUIRED SIGNATURE:** 

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.)

CUTHRECL

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

5 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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