

LD6000071684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

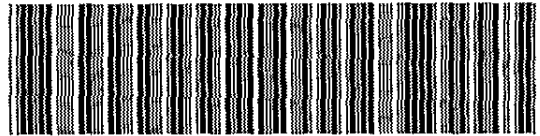
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300077463883

07/17/06--01039--004 **155.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 JUL 17 PM 12:42

DB

HUTCHISON, MAMELE & COOVER, P.A.

ATTORNEYS AND COUNSELORS AT LAW

WILLIAM C. HUTCHISON, JR. (1928-1991)
* RICHARD L. MAMELE
STEPHEN H. COOVER

* BOARD CERTIFIED
MARITAL & FAMILY LAW

PARK-FULTON BUILDING, 230 NORTH PARK AVENUE
POST OFFICE BOX 1149

SANFORD, FLORIDA 32772-1149
(407) 322-4051
FAX (407) 330-0866

July 14, 2006

Corporate Records Bureau
Division of Corporations
Department of State
P.O. Box 6327
Tallahassee, FL 32301

Re: **DGA FISH CAMP, LLC**

Ladies/Gentlemen:

Enclosed please find the original and one (1) copy of the Articles of Organization for the above-referenced entity, together with my client's check in the sum of One Hundred Fifty-Five Dollars (\$155.00) for filing and return of a certified copy of the articles.

Should you have any questions, please feel free to call.

Very truly yours,



Stephen H. Coover

SHC/mjr
Enclosures

- 1) Original and one copy of Articles of Organization
- 2) Check \$155.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 JUL 17 PM 12:42

ARTICLES OF ORGANIZATION
OF
DGA FISH CAMP, LLC

ARTICLE I - NAME

The name of the limited liability company is *DGA FISH CAMP, LLC*.

ARTICLE II - ADDRESS

The mailing address and the street address of the principal office of the Limited Liability Company is 230 North Park Avenue, Sanford, FL 32771.

ARTICLE III
REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:

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

Stephen H. Coover
230 North Park Avenue
Sanford, FL 32771

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 property and complete performance of my duties, and I am familiar with, and accepts the obligations of my position as registered agent as provided for in Chapter 608, F.S..


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:

Name and Address:

MGRM

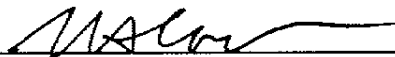
Jeffrey C. Triplett
1616 E. 4th Street
Sanford, FL 32771

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 JUL 17 PM 12:42

ARTICLE V - DURATION

The duration of the Limited Liability Company shall, unless limited by the terms of any Regulations Agreement, be perpetual.

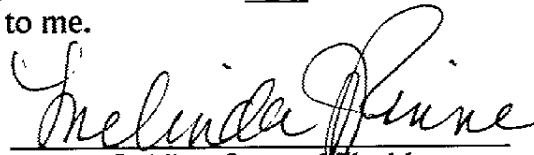
IN WITNESS WHEREOF, the undersigned, as subscriber, has executed the foregoing Articles of Organization on the 13 day of July, 2006.


Stephen H. Coover, subscriber

(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.)

STATE OF FLORIDA
COUNTY OF SEMINOLE

The foregoing instrument was acknowledged before me this 13th day of July, 2006 by Stephen H. Coover, who is personally known to me.


Notary Public - State of Florida

My Commission Expires:



Melinda J. Rinne
MY COMMISSION # DD215840 EXPIRES
June 19, 2007
BONDED THRU TROY FAIN INSURANCE, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 JUL 17 PM 12:42