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GIAISIOU OF CORPORATIONS

W06-24440

B. McKnight JUL 2 7 2008

COVER LETTER

то:	Registration Sec Division of Corp						
SUBJECT: Katherine Dorian, LLC (Name of Limited Liability Company)							
		(Name of Limited	і Біаншу Сотрап) (y)			
The en	closed Articles of	Organization and fec(s) are su	ibmitted for filing.				
Please	return all correspo	ondence concerning this matte	r to the following:				
	Katheine D	Dorian					
(Name of Person)							
Katherine Dorian, LLC							
(Firm/Company)							
145 Alligator Run							
(Address)							
Quincy, FL 32351							
(City/State and Zip Code)							
For fur	ther information c	concerning this matter, please	call:				
<u>V. Earl Lines</u> at (850) 893-3045							
(Name of Person) (Area Code & Daytime Telephone Number)							
Enclos	sed is a check for	r the following amount:					
▼ \$125	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fili Certified Copy (additional copy is	_	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registratio Division o Clifton Bu 2661 Exec	f Corporatio	ns		



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 26, 2006

KATHERINE DORIAN 145 ALLIGATOR RUN QUINCY, FL 32351

SUBJECT: KATHERINE DORIAN, LLC

Ref. Number: W06000024440

We have received your document for KATHERINE DORIAN, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on May 19, 2006. Please amend your document accordingly.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Becky McKnight Document Specialist New Filing Section

Letter Number: 306A00037096

STATE OF FLORIDA)

COUNTY OF LEON)

016-30-06

ARTICLES OF ORGANIZATION OF A LIMITED LIABILITY COMPANY

THE SUBSCRIBERS to these Articles of Organization of a Limited Liability Company, all natural persons competent to contract, hereby elect to form a Limited Liability Company under the laws of the State of Florida.

ARTICLE I. - NAME

The name of the Limited Liability Company shall be Katherine Dorian, LLC, and its principal office is to be located in Gadsden County, Florida.

ARTICLE II. - PRINCIPAL OFFICE

This limited Liability Company will have as its principal office address: 145 Alligator Run, Quincy, Fl 32351 and will exist in perpetuity, unless voluntarily dissolved, or dissolved by operation of law.

ARTICLE III. - PURPOSE

The purposes of this Limited Liability Company shall be to transact any and all lawful business under the Laws of the State of Florida.

ARTICLE IV. - REGISTERED AGENT

The Limited Liability Company hereby appoints Katherine Dorian, 145 Alligator Run, Quincy, Fl 32351, to serve as registered agent, and who by signing below affirms that he is familiar with and accepts the obligations of this position.

ARTICLE V. - AMENDMENTS TO ARTICLES

These Articles of Organization may be amended from time to

time as may be required in compliance with Florida Statutes.

ARTICLE VI. - EFFECTIVE DATE

The effective date of this Organization is June 30, 2006, or the effective date as determined by the State of Florida if subsequent to June 30, 2006.

ARTICLE VII. - MEMBERS

The members of this Limited Liability Company are as follows: $\stackrel{\textstyle \sim}{\sim}$ Katherine Dorian, Managing Member, 145 Alligator Run, Quincy, FL 32351.

IN WITNESS WHEREOF, I, the aforementioned Registered Agent and Managing Member, have hereunto affixed my hand and seal this __th Day of June, A.D/2006.

STATE OF FLORIDA) COUNTY OF LEON

ACKNOWLEDGEMENT

Katherine Dorian

I HEREBY CERTIFY that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgements, Katherine Dorian, known by me to be the person described in or identified by Florida Drivers License Number USD 506-50-470 and who subscribed the foregoing Articles of Organization of a Limited Liability Company, and he acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS MY HAND and official seal this , 2006, in the County of Leon, and the State of

commission expires: