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(Requestor's Name)
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PICK-UP WAIT MAIL
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SECKETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Dorand Development, Limited Liability Company (Name of Limited Liability Company)	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Rodney Dorand	
(Name of Person)	
(Firm/Company)	· · · · · · · · · · · · · · · · · · ·
530 Blue Mountain Beach Road	
(Address)	
Santa Rosa Beach, Florida, 32459	
(City/State and Zip Code)	
	= _
For further information concerning this matter, please call:	SECI SECI
Rodney Dorand at (334) 399-9553	06 JUL 27 PM I SECRETARY OF S
(Name of Person) (Area Code & Daytime Telephone Number)	7 P
Enclosed is a check for the following amount:	
_	
Certificate of Status Certified Copy Certificate of	
(additional copy is enclosed) Certified Co (additional copy)	
Mailing Address Street/Courier Address Registration Section Registration Section	
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	TI	\mathbf{CL}	Æ	Ι-	N	am	e

The name of the Limited Liability Company is:

Dorand Development, Limited Liability Company

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

Principal Office Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address:

Trinetput Office Madress.	Maining Madi Cool	
Rodney Dorand	Rodney Dorand	
530 Blue Mountain Beach Road	530 Blue Mountain Beach Road	•
Santa Rosa Beach, Florida, 32459	Santa Rosa Beach, Florida, 32459	•
	stered Office, & Registered Agent's Signature n Registered Agent. You must designate an individual or another f the registered agent are: Name]
	—————————————————————————————————————	
530 Blue Mountain	Beach Road	· _
Florida str	Beach Road reet address (P.O. Box NOT acceptable)	<u> </u>
Santa Rosa Beach	FL 32459	
City, S	State, and Zip	

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

Registered Agen is Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

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 Membe	er
MGRM	KAD Away Trust
	20 Via Destino
	San Clemente, CA 92673
MGRM	The Rodney D. and Barbara H. Dorand Living Trust
	530 Blue Mountain Beach Road
	Santa Rosa Beach, Florida, 32459
MGR	The Leigh and Kimberly Dorand Living Trust
	3552 East Jaeger Circle
	Mesa, Arizona 85213
(Use attachment if necessary)	
•	
	than the date of filing: (OPTIONAL)
	must be specific and cannot be more than five business days prior
90 days after the date of filing.)	TAS S
	SEC.
REQUIRED SIGNATURE:	물을 두 ㄲ
	27 E
	member or an authorized representative of a member.
Signature of a	member or an authorized representative of a member.
(In a secondary se	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
of this docume	e with Action 608.408(3), Florida Statutes, the execution ent constitutes an affirmation under the penalties of perjury
that the facts	s stated herein are true.)
120	DNEY D. DORAUD
	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)