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SECRETARY OF STATE
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W-1258

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Dave and Dave Carpentry, L.L.C. (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:	
David S. Culver (Name of Person)	
Dave and Dave Carpentry, LLC (Firm/Company)	
10840 Hwy 98 W (Address)	
Pensacola, F/ 32506 (City/State and Zip Code)	
For further information concerning this matter, please call: David H. Adams at 615 568-5651 ARR ARR (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount:	ra empe
David H. Adams at (615) 568-5651 AS L. (Area Code & Daytime Telephone Number) (Area Code & Daytime Telephone Number)	Inches Inches
Enclosed is a check for the following amount:	C -
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & Certificate of Status \$\bigcup \\$155.00 Filing Fee & Certificate of Status \$\bigcup \\$160.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of Corporations	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:

Dave and Dave Carp	ventry LLC
(Must end with the words "Limited Liability Company, "Limited Compa	ny" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address: Mail	ing Address:
10840 Hwy 9860 108 Pensacola, F1. 32506 Pm	340 Huy 98W secola, Fl. 32506
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its own Registered Age business entity with an active Florida registration.)	e, & Registered Agent's Signature: ent. You must designate an individual or another ARE ARE ed agent are:
The name and the Florida street address of the register	ed agent are:
Anna E. Under	rwood SEC. T
10854 Hwy 98 (P. Florida street address (P.	O. Box NOT acceptable)

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 Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

The name and address of each Manager	or Managing Member is as follows:	
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
David S. Chluer Mohl	10840 Hwy 98W 12xxxcola, F/ 32506	
Devid H. Adams Mokill	10854 Hwy 98W Rensarala, F1 32506	
		
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the da (If an effective date is listed, the date must be spot or 90 days after the date of filing.)	te of filing: (0	OPTIONAL) siness days prior
REQUIRED SIGNATURE:	12l-	F. 22
(In accordance with sectio	r an authorized representative of a member. n 608.408(3), Florida Statutes, the execution	OO7 JAH SECRETA
that the facts stated here David H.	es an affirmation under the penalties of perjury bin are true.) About 5 I or printed name of signee	ARY OF STA
Filing Fees:		1: 12 I: 12 STATE ORIDA
\$125.00 Filing Fee for Articles of Organiz of Registered Agent	ation and Designation	

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

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)