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(Re	questor's Name)	_
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hA)	dress)	
(/ 100	u1000)	
(Cit	y/State/Zip/Phone	? #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
(50	ourners rumber,	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO:	Registration Se Division of Co			
SUBJE	_{CCT:} D. J. W	hitley, LLC		
		(Name of Limited	d Liability Company)	
. The end	closed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
	Deborah J.			
		(1	Name of Person)	
	D. J. Whitle	ey, LLC		9 01 N.S.
•		(Firm/Company)	马鸮
	P. O. Box	1379		R-6 CREE
•			(Address)	P
	Silver Spri	ings, FL 34489-13	379	TAPR -6 PH 12: 50
•		 	/State and Zip Code)	50
For fur	ther information	concerning this matter, please	call:	
Debo	rah J. Whitl	ey	at (352) 629-361	3
	(Name	of Person)	(Area Code & Daytime To	elephone Number)
Enclos	ed is a check fo	or the following amount:		
₹] \$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$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	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns · Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Name: e Limited Liability Com	pany is:	
D. J. Whitley, L			
Must end with the	words "Limited Liability Compa	any, "Limited Company" or their abbreviation "LLC," or "I	C.,")
RTICLE II -	- Address:		
he mailing ad	dress and street address	of the principal office of the Limited Liabilit	ty Company is:
rincipal Offi	ce Address:	Mailing Address:	
275 NW 73rd Te	rrane	P. O. Box 1379	
2/3 NVV /3/0 18	11400	r. O. Box 1373	
Ocala, FL 34482		Silver Springs, FL 34489-1379 egistered Office, & Registered Agent's Sign	nature:
RTICLE III The Limited Liabil business entity with	- Registered Agent, Reity Company cannot serve as its han active Florida registration.)	Silver Springs, FL 34489-1379 egistered Office, & Registered Agent's Signown Registered Agent. You must designate an individual of	or another
RTICLE III The Limited Liabil business entity with	- Registered Agent, Reity Company cannot serve as its han active Florida registration.)	Silver Springs, FL 34489-1379 egistered Office, & Registered Agent's Signown Registered Agent. You must designate an individual of	or another O7 APR
ARTICLE III The Limited Liabil business entity with	- Registered Agent, Reity Company cannot serve as its han active Florida registration.)	Silver Springs, FL 34489-1379 egistered Office, & Registered Agent's Signown Registered Agent. You must designate an individual of	or another OT APR -6
ARTICLE III The Limited Liabil business entity with	- Registered Agent, Reity Company cannot serve as its han active Florida registration.)	Silver Springs, FL 34489-1379 egistered Office, & Registered Agent's Signown Registered Agent. You must designate an individual of the registered agent are: Name	or another O7 APR -6
ARTICLE III The Limited Liabil business entity with	- Registered Agent, Resity Company cannot serve as its han active Florida registration.) the Florida street address Deborah J. Whitley	Silver Springs, FL 34489-1379 egistered Office, & Registered Agent's Signown Registered Agent. You must designate an individual of the registered agent are: Name	or another O7 APR -6
RTICLE III The Limited Liabil business entity with	- Registered Agent, Resity Company cannot serve as its han active Florida registration.) the Florida street address Deborah J. Whitley	Silver Springs, FL 34489-1379 egistered Office, & Registered Agent's Signown Registered Agent. You must designate an individual of softhe registered agent are: Name	or another O7 APR

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

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

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
Manager	Deborah J. Whitley P. O. Box 1379 Silver Springs, FL 34489-1379	
4 		OT APR
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(Use attachment if necessary)		1
(Use attachment if necessary) CLE V: Effective date, if other than the date of fective date is listed, the date must be so days after the date of filing.)	ate of filing: (OP	ΓΙΟΝΑ ess days
CLE V: Effective date, if other than the dateffective date is listed, the date must be s	ate of filing: (OP specific and cannot be more than five busine	FIONA FIONA Coss days
CLE V: Effective date, if other than the date of fective date is listed, the date must be so days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of	while or an authorized representative of a member.	FIONA Fiss days
CLE V: Effective date, if other than the date effective date is listed, the date must be so days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of the date of the	on 608.408(3), Florida Statutes, the execution tes an affirmation under the penalties of perjury	FIONA FIONA FIEST GAYS

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)