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SECRETARY OF STATE OF OIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Se Division of Cor			
_{SUBJECT:} Davis	Island Kids, LLC		
	(Name of Limite	d Liability Company)	_
The enclosed Articles of	Organization and fee(s) are s	submitted for filing.	
Please return all correspo	ndence concerning this matte	er to the following:	
Dorothy Fa	arrell		
	((Name of Person)	
		(Circuit Commons)	
_		(Firm/Company)	
701 Chipp	ewa Avenue		
		(Address)	8 5
Tampa, Fl	. 33606		OT OCT 26
	(City	y/State and Zip Code)	P
For further information c	oncerning this matter, please	e call:	6 PH 1:42
Kevin Demers		at (305) 232-1761	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
(Name	of Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for	r the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee & Certificate of (additional copy is enclosed) S160.00 Filing Fee & Certificate of (additional copy is enclosed)	of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Davis Island Kids, LLC		
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Cor	npany is:
Principal Office Address:	Mailing Address:	
701 CHIPPEWA Avenue	701 Chippewa Avenue	
Tampa, Florida 33606	Tampa, Flprida 33606	•
	tered Office, & Registered Agent's Signature Registered Agent. You must designate an individual or anothe	
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Dorothy Farrell	Registered Agent. You must designate an individual or another	DIVISION OF 26
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Dorothy Farrell	Registered Agent. You must designate an individual or another the registered agent are:	DIVISION OF 26
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Dorothy Farrell 701 Chippewa	Registered Agent. You must designate an individual or another the registered agent are:	DIVISION OF 26
(The Limited Liability Company cannot serve as its own business entity with an active Florida registration.) The name and the Florida street address of Dorothy Farrell 701 Chippewa	Registered Agent. You must designate an individual or another the registered agent are: Name Avenue Let address (P.O. Box NOT acceptable)	er 🕝

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:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Dorothy Farrell	_
	701 Chippewa Avenue	
	Tampa, Florida 33606	-
		-
		-
		07 QCT 26 PH
		3
		22
		- ~
		_ =====================================
(Use attachment if necessary)	•	
	date of filing: (OPTIC	
0 days after the date of filing.)		
0 days after the date of filing.) REQUIRED SIGNATURE:	Jacobson an authorized representative of a member.	
O days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with sect	or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury	

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)