

LD70000116757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOLORJA LLC
P O BOX 2424
FLAGLER BEACH, FL 32136

Dear Sir/Madam:

We are enclosing an extra copy of our Articles of organization.
Please acknowledge receipt, stamped and mail the copy to us for our file.
A self addressed and stamped envelope is attached.

Thank you


Ben Tolentino
Accountant
386 439-2984

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DOLORJA LLC

ARTICLE II - Address:

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

Principal Office Address:

907 HIBISCUS AVENUE
BUNNELL FL 32110

Mailing Address:

PO BOX 2424
FLAHER BEACH FL 32136

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

BEN TOLENTINO

Name

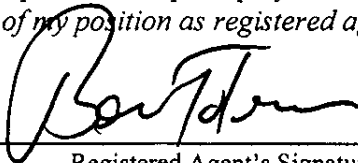
69 N RIVERWALK DR.

Florida street address (P.O. Box **NOT** acceptable)

PALM COAST FL 32137

City, 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 Agent's Signature

(CONTINUED)

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TALLAHASSEE, FLORIDA

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

DOUGLAS A. CORL
1511 S. DAYTONA AVENUE
FLAGLER BEACH FL 32134

MGRM

LORI L. CORL
1511 S. DAYTONA AVENUE
FLAGLER BEACH FL 32134

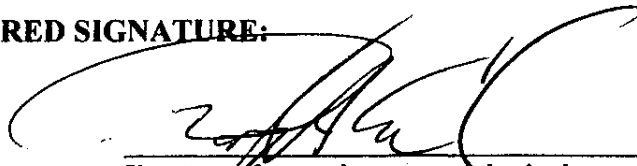
MGRM

JAMES C. SCHWENK
15 WEDGEWOOD LANE
PALM COAST FL 32137

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

DOUGLAS A. CORL

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)

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