Page 1 of 1

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: A.B.S. OF JACKSONVILLE, INC.

Account Number: I20010000215 Phone

: (904)777-1533

Fax Number

: (904)777-1717

ORIDA/FOREIGN LIMITED LIABILITY CO.

Deadwood Enterprises, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
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Electronic Filing Menu

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Help

HU8000000 159 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I, NAME:

The name of the Limited Liability Company is: Deadwood Enterprises, LLC

ARTICLE II, ADDRESS:

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

4522 St Augustine Road Jacksonville, FL 32207

ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

The name and Florida street address of the registered agent are: Donald Wells 4522 St Augustine Road Jacksonville, FL 32207

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of 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, Florida Statutes.

Donald Wells/ Registered Agent

Date

H08000000 189 3

ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

The name(s) and address(es) of each Manager or Managing Member is as follows:

Title: MGR.

Name and Address: Donald Wells 5836 Tempest Street Jacksonville, FL 32244

ARTICLE V. EFFECTIVE DATE

The effective date of this document shall be January 2, 2008.

REQUIRED SIGNATURE:

Donald Wells, Member

IN WITNESS WHEREOF, the undersigned member(s) has executed these Articles of	8	
Organization, this A day of Jan, 2008.	5	
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(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

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