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(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Doc	cument Number)	
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SECRETARY OF STATE DIVISION OF CORPORATIONS

J. BRYAN

JAN 11 2008

**EXAMINER** 

## COVER LETTER

TO: Registration Division of C		•	
SUBJECT: DIRT	TECH, LLC		
SUBJECT.		ted Liability Company)	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
DOUG BA	ANGLE		
		(Name of Person)	
		(Firm/Company)	
518 DON	CA TDAII	(Time Company)	9 DW 5
518 PONCA TRAIL (Address)		- Se Sinche	
MAITLAN	ID, FLORIDA 327	51	N 10 PM 2: 01
		ty/State and Zip Code)	
For further information	concerning this matter, pleas	se call:	OB JAN 10 PM 2: 00
DOUG BANG	LE	407 718-823	
(Nam	e of Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check f	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 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 Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company i	s:
DIRT TECH, LLC	
(Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
518 PONCA TRAIL	518 PONCA TRAIL
MAITLAND, FLORIDA 32751	MAITLAND, FLORIDA 32751
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regional business entity with an active Florida registration.)  The name and the Florida street address of the	gistered Agent. You must designate an individual or another SSE
DOUG BANGLE	PH
Nam	ie " Dii
518 PONCA TRAIL	RATIONS 2: 00
Florida street a	address (P.O. Box NOT acceptable)
MAITLAND, FLORI	DA <sub>2</sub> 32751
City, State	e, 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 (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: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGMR DOUG BANGLE 518 PONCA TRAIL MAITLAND, FLORIDA 32751 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member of 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.) DOUG BANGLE 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)