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Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
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Office Use Only



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T. HAMPTON

MAR 1 8 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations			
SURJECT: Deucoc L	.LC		
SUBJECT: Devcor, L	me of Limited Liabili	ty Company)	
The enclosed Articles of Organization an	d fee(s) are submitted	for filing.	
Please return all correspondence concern	ing this matter to the	following:	
For BENT	ر د		
ERIC BECHT	(Name of	Person)	
	(Firm/Cor	npany)	
1447 Gallh	ecca Cou	+	
1447 Gallb	(Addre	ess)	
Trinity, Flo	rida 34	655	
	(City/State and	Zip Code)	
For further information concerning this n	natter, please call:		
Fallin			
Cric Bechtel (Name of Person)	at (127) 455 T Area Code & Daytime Tel	ephone Number)
	٠		
Enclosed is a check for the following		_	
\$125.00 Filing Fee \$\int\$\$\$\\$\\$\$\$\$\\$	f Status Cert	.00 Filing Fee & ified Copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration Se Division of Co P.O. Box 6327 Tallahassee, F	ction rporations L 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

	•		
DEVCOR	11-0-		

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

ARTICLE I - Name:

The name of the Limited Liability Company is:

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

Mailing Address:

Principal Office Address:	Mailing Address:
1447 Gallberry, Court	1447 Gallberry Court
Trinity, FL 34655	Trinity, FL 34655

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Richard Millian 3982 Tampa Road

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

Oldsmar FL 34677

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..

(CONTINUED) Page 1 of 2

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

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.)

FRIC BECHTEL
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)