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Certified Copies Certificates of Statu	JS

Special Instructions to Filing Officer:

L. SELLERS

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EXAMINER

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COVER LETTER

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TO: Registration Section Division of Corporati	ons			
SUBJECT: DOMINIO	N RESOUF	RCES UNL	IMITED	, LLC
SUBJECT:		d Liability Compa		<u>, </u>
9 · · ·				
The enclosed Articles of Organi	zation and fee(s) are s	ubmitted for filing		
Please return all correspondence	concerning this matte	er to the following:		
James G. Ha	hl, Esq.			
	(Name of Person)		
Van Houten,	Ponder & F	lahl, P.A.		
 .		Firm/Company)		
114 South Pa	almetto Ave	nue		
		(Address)		
Daytona Bea	ich, FL 321	14		
		/State and Zip Code)	1	
For further information concern	ing this matter, please	call:		
James G. Hahl		at (_386)	257-177	77
(Name of Perso	n)	(Area Code	& Daytime Tele	phone Number)
Enclosed is a check for the fo	ollowing amount:			
\$125.00 Filing Fee \$130 Cert	0.00 Filing Fee & [\$155.00 Filing Certified Cop (additional copy	у	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divis P.O.	ing Address stration Section sion of Corporations Box 6327 hassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporations	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name	A	RT	'ICI	LE	I	- [N	a	m	e
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The name of the Limited Liability Company is:

Dominion Resources Unlimited, 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 principal office of the Limited Liability Company is:

Principal Office Address:	Maining Address:
595 West Granada Boulevard	595 West Granada Boulevard
Ormond Beach, FL 32174	Ormond Beach, FL 32174

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:

Michael W. McDonough Name

595 West Granada Boulevard

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

Ormond Beach FL 32174
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 (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:

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Michael W. McDonough
· · · · · · · · · · · · · · · · · · ·	595 West Granada Boulevard
	Ormond Beach, FL 32174
MGRM	Daniel Murray
	58 Mayfield Terrace
	Ormond Beach, FL 32174
	
(Use attachment if necessary)	
	n the date of filing: (OPTION
LE V: Effective date, if other than	
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fective date is listed, the date mudays after the date of filing.) REQUIRED SIGNATURE:	ust be specific and cannot be more than five business d

Michael W. McDonough

that the facts stated herein are true.)

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)