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SECRETARY OF STATE
DIVISION OF CORPORATION

Réportent

## COVER LETTER

Registration Section
Division of Corporations

SUBJECT: BRYAN DUNBAR, L.L.C.	
(Name of Limited Li	ability Company)
The enclosed Articles of Organization and fee(s) are subm	nitted for filing.
Please return all correspondence concerning this matter to	the following:
BRYAN DUNBAR	
(Nan	e of Person)
BRYAN DUNBAR, L.L.C.	
(Firm	n/Company)
3791 W HWY 316	
(,	Address)
REDDICK,FL. 32686	
(City/Stat	e and Zip Code)
For further information concerning this matter, please call	:
BRYAN DUNBAR	352 816-0644
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
Certificate of Status	\$155.00 Filing Fee & \$\sqrt{1}\$\$\$\$160.00 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 Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is	s:	
BRYAN DUNBAR, L.L.C.	With Comment of LC 7 and LC 70	
(Must end with the words "Limited Liab	only Company, "L.L.C.," or "LL.C.")	
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Com	pany is:
Principal Office Address:	Mailing Address:	
3791 W HWY 316	3791 W HWY 316	
REDDICK,FL. 32686	REDDICK,FL. 32686	
ARTICLE III - Registered Agent, Registere The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	istered Agent. You must designate an individual or another	. 01
The name and the Florida street address of the	registered agent are:	SECRE VISION I
BRYAN DUNBAR	· · · · · · · · · · · · · · · · · · ·	<b>-</b> ≅₹.
Name		7 7
3791 W HWY 316		<b>곳</b> 젖다

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.

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

Registered Agent's Signature (REQUIRED)

City, State, and Zip

REDDICK,32686

(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 Mem	iber
MGR	BRYAN DUNBAR
	3791 W HWY 316
	REDDICK,FL. 32686
MGRM	RHONDA M. DUNBAR
	3791 W HWY 316
	REDDICK,FL. 32686
<del></del>	· · · · · · · · · · · · · · · · · · ·
	**************************************
(Use attachment if necessary	y)
	00/47/0000
CLE V: Effective date, if other	r than the date of filing: 03/17/2008 (OPTIONAL)
	e must be specific and cannot be more than five business days prio
0 days after the date of filing.	.)
REQUIRED SIGNATURE	D:
2	/
-/-/-	year Dun

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.)

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)