L08000048618

(Requestor's Name)
(Address) .
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
W8-18891
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Office Use Only



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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

FILED



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 14, 2008

ANDY BENTLEY P.O. BOX 693 WINER HAVEN, FL 33882-0693

SUBJECT: DANDY INVESTMENTS LIMITED LIABILITY COMPANY

Ref. Number: W08000018891

We have received your document for DANDY INVESTMENTS THMITED LIABILITY COMPANY and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 508A00021978

SECRETARY OF STATE

District of Compositions D.O. DOV 6997 Wellebesses Florida 99914



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 1, 2008

ANDY BENTLEY P.O. BOX 693 WINER HAVEN, FL 33882-0693

SUBJECT: DANDY INVESTMENTS LIMITED LIABILITY COMPANY

Ref. Number: W08000018891

We have received your document for DANDY INVESTMENTS SIMITED LIABILITY COMPANY. However, the document has not been filed and returned for the following:

You failed to make the correction(s) requested in our previous letter.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 908A00027651

COVER LETTER

10.	Division of Corporations
SUB.	IECT: Dandy Investments Limited Liability Company
300	(Name of Limited Liability Company)
The e	inclosed Articles of Organization and fee(s) are submitted for filing.
Pleas	e return all correspondence concerning this matter to the following:
	Andy Bentley
	(Name of Person)
	Dandy Investments Limited Liability Company
	(Firm/Company)
	P.O. Box 693
	(Address)
	Winter Haven, FI 33882-0693
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
And	dy Bentley <u>at (</u> 863 <u>)</u> 412-0576
	(Name of Person) (Area Code & Daytime Telephone Number)
Encl	osed is a check for the following amount:
 \$12.	5.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Bentley Home Solutions LLC			
Bentley Home Solutions LLC			
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:			
The mailing address and street address of the pri	ncipal office of the Limited	Liability C	Company is:
Principal Office Address:	Mailing Address:	SECRI ALLAI	
P.O. Box 698 ST Lake LINK LICLE Winter Haven, FL33882-0693 Winter Haven, FL33882-0693 Winter Haven	P.O. Box 693 Winter Haven, FI 33882-0693	MAY II RETARY AHASSI	_=
Winter Haven, FL33882-0693 W. Ater Hovels, F.	Williel Flaven, 11 00002-0000		_ m
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Ager red Agent. You must designate an in	Signat Widual or and	ure:
The name and the Florida street address of the re	gistered agent are:		
Andy Bentley			
Name			
57 Lake Link Circle S			
	ress (P.O. Box <u>NOT</u> acceptable)		
Winter Haven, FI 338	8 <u>4</u>		
City, State, ar	nd Zip		
Having been named as registered agent and to a	ccept service of process for t	the above st	ated 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)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	Andy Bentley
	P.O. Box 693
	Winter Haven, Fl 33882-0693
MGMR	Ray Bentley
	P.O. Box 747
	Winter Haven, FI 33881
	Williel Havell, P155661
	HE A
	—————————————————————————————————————
	
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(Use attachment if necessary))
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LE V: Effective date, if other	than the date of filing: (OPTION
days after the date of filing.)	must be specific and cannot be more than five business d
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.)

Andy Bentley

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)