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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Gary B. Davenport, P.A.**  
*Attorney*

June 16, 2008

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

RE: Kevin M. Davenport Design Consultants, LLC

Ladies/Gentlemen:

The enclosed Articles of Organization and fee is submitted for filing. Please return all correspondence concerning this matter to: Gary B. Davenport, Esq., Gary B. Davenport, PA, P.O. Box 1012, Flagler Beach, FL 32136-1012.

For further information concerning this matter, please call Susan Junod at 386/439-6892. A check in the amount of \$125.00 is enclosed representing the filing fee.

Sincerely,



Gary B. Davenport

GBD:pt

Enclosure

**ARTICLES OF ORGANIZATION**

**FOR**

**KEVIN M. DAVENPORT DESIGN CONSULTANTS, LLC  
a Florida Limited Liability Company**

The undersigned, an authorized representative of a Member, desiring to form a limited liability company under and pursuant to Florida Statute 608, entitled the Florida Limited Liability Company Act, does hereby adopt the following Articles of Organization for such company:

**ARTICLE I - NAME**

The name of this company shall be Kevin M. Davenport Design Consultants, LLC

**ARTICLE II - ADDRESS OF PRINCIPAL OFFICE**

The street address and the mailing address is 245 River Plantation Road South, St. Augustine, FL 32095.

**ARTICLE III - REGISTERED AGENT AND OFFICE**


The name and street address of the initial registered agent and office for this company is as follows: Gary B. Davenport, Gary B. Davenport, PA, 1280-B N. Ponce de Leon Blvd., St. Augustine, FL 321084.

**ARTICLE IV - MANAGER**

The initial manager of the limited liability company is as follows:

Kevin M. Davenport

IN WITNESS WHEREOF, the undersigned, as an authorized representative of a Member has hereunto set his hand and seal this 16<sup>th</sup> day of June, 2008.

  
Gary B. Davenport, Authorized Representative  
of a Member

STATE OF FLORIDA  
COUNTY OF St. Johns

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared Gary B. Davenport,

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SECRETARY OF STATE  
TALLAHASSEE, FL 32399

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who is personally known to me and who is described as an Authorized Representative of a Member and who executed the foregoing Articles of Organization, and acknowledged before me that he subscribed to those Articles of Organization.

WITNESS my hand and official seal in the County and State named above this 16<sup>th</sup> day of June, 2008.



**Patricia C. Trezza**  
Commission # DD543512  
Expires April 23, 2010  
Bonded Troy Fam - Insurance, Inc. 800-385-7018

*Patricia C. Trezza*  
Notary Public **PATRICIA C. TREZZA**

### Acceptance of Registered Agent

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.

*Gary B. Davenport*  
Gary B. Davenport  
Registered Agent  
Date: June 10<sup>th</sup> 2008

**FILED**

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TALLAHASSEE, FLORIDA