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SECRETARY OF STATE
SECRETARY OF STATE
TALL SHASSEF FLORIDA

COVER LETTER

10:	Division of Corporations
CHDH	G Douglas Enterprises, LLC
•	(Name of Limited Liability Company)
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Sharon McGee Brockenbrough
	(Name of Person)
	Hale, McGee & Associates, LLC
	Division of Corporations SUBJECT: G Douglas Enterprises, LLC (Name of Limited Liability Company) The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Sharon McGee Brockenbrough (Name of Person)
	883 W Granada Blvd
	(Address)
	Ormond Beach, FL 32174
	(City/State and Zip Code)
Fo r fu	ther information concerning this matter, please call:
Sha	
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclos	sed is a check for the following amount:
□\$125	Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy
	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
G Douglas Enterprises, 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 Company is:
Principal Office Address:	Mailing Address:
3207 Margaret Oaks Lane	3207 Margaret Oaks Lane
Orlando, FL 32806	Orlando, FL 32806
(The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re Sharon McGee Brock Name	gistered agent are:
883 W Granada Blvd	
Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)
Ormond Beach,	_{FL} 32174
City, State, ar	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

PILED

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SECRETARY OF STATE

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

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

MGR	George R Douglas, Jr.	
	3207 Margaret Oaks Lane	
	Orlando, FL 32806	
MGRM	Shirley E Douglas	
	3207 Margaret Oaks Lane	
	Orlando, FL 32806	
· · · · · · · · · · · · · · · · · · ·		
(Use attachment if necessary)		
F V. Effective date if other than	the date of filing: (OP	TION

REQUIRED SIGNATURE:

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.)

George R Douglas, Jr.

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)

08 SEP -5 PM 12: 17
SECNETARY OF STATE
TALL ARASSES STEPPING