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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	Certificates	of Status
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SECRETARY OF STATE

T. HAMPTON

JUL - 2 2009

EXAMINER

COVER LETTER

	Registration Section Division of Corporations
SUBJEC	
	Name of Limited Liability Company
The enclos	sed Articles of Organization and fee(s) are submitted for filing.
Please retu	urn all correspondence concerning this matter to the following:
_	Fred Beyer Name of Person
	Name of Person
	Firm/Company
	411 Mayfair Drive
	Address
	Venice, Fl. 34293 City/State and Zip Code
	FBEYER@PRODIGY.NET
- C 4	E-mail address: (to be used for future annual report notification)
For furtner	r information concerning this matter, please call:
	Fred Beyer at (941) 497-4057 Name of Person Area Code & Daytime Telephone Number
	is a check for the following amount:
<u>/</u>]\$125.00	Filing Fee \$\int_\$\$130.00 Filing Fee & \$\int_\$\$\$155.00 Filing Fee & \$\int_\$\$\$\$\$\$\$\$\$\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) 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

ARTICLE I - Name:	FLORIDA LIMITED LIABILITY COMPANY
The name of the Limited Liability Company	15:
DJRE,	
(Must end with the words "Limited Lie	ability 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:	Mailing Address:
2001 Gasparilla Road Unit D19 Placida, Florida 33946	2001 Gasparilla Road Unit D19 Placida, Florida 33946
(The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the	
Fred Nar	Beyer
När	πe
	fair Drive
Florida street address (P	O. Box NOT acceptable)
Venice, Fl. 34293	
City, State	e, and Zip
liability company at the place designated i registered agent and agree to act in this capa statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 608, F.S.
700	JUN CRE
Registered Agent's Sig	nature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICL	E IX	/- N	Janager	(s) or	Managing	Membere	(\mathbf{s})	1:
	,		T	(0, 0-	T . T	T. Z - CLE 1	, ~ ,	, -

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

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	David Castro
· · · · · · · · · · · · · · · · · · ·	2001 Gasparilla Road Unit D19
	Placida, Florida 33946
MGRM	Jeremy Jones
	887 Rotonda Circle
	Rotonda West, Florida 33947
(Use attachment if necessary)	
	(OPTIONAL)
CLE V: Effective date, if other than the	he date of filing:
enective date is usted, the date must 10 days after the date of filing.)	be specific and cannot be more than five business days pr
o days allor the date of image,	
REQUIRED SIGNATURE:	
2.84	
Signature of a mem	ther or an authorized representative of a member.
of this document co	section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of perjury
that the facts stated	

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)

SECRETARY OF STATE DIVISION OF CORPORATIONS

09 JUN 29 AM 10: 09

Typed or printed name of signee