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(F	Requestor's Name)			
A)	address)			
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PiCK-UP	WAIT MAIL			
(É	Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
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07/29/09--01019--008 **160.00

Effective Date 07/24/09

SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JUL 3 0 2009

EXAMINER

COYER LETTER

TO:

TO:	Registration Division of C						
SUBJI	ECT:	THE	HON	OR1 8	SYSTEM		
Name of Limited Liability Company							
The en	closed Articles	of Organization and fee(s) are	submitt	ted for fil	ing.		
Please	return all corres	pondence concerning this ma	tter to th	e followi	ng:		
		НОМ		I. BELL	. SR.		
			Name o	of Person			
	THE HONOR1 SYSTEM Firm/Company 6073 SPANISH OAK DRIVE						
			Ad	dress			
	PENSACOLA, FLORIDA 32526 City/State and Zip Code						
			•	•			
		ho E-mail address: (to be used	for future	e annual n	port notification	on)	
For fur	ther information	concerning this matter, pleas	e call:				
		R M. BELL SR.	at (850			
	Name	of Person		Area Co	ode & Daytime	Telep	phone Number
Enclos	sed is a check f	or the following amount:					
] \$125.	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Ce	ertified C	ling Fee & Copy opy is enclosed	<u></u>	\$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		Registr Division Clifton 2661 E	Courier Add ation Section on of Corpora Building executive Cen assee, FL 323	tions	

Effective Date 07/24/09

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Cor	mpany is:				
	DR1 SYSTEM, LLC. imited Liability Company," "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address	s of the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
6073 SPANISH OAK DRIVE PENSACOLA, FLORIDA 32526	6073 SPANISH OAK DRIVE PENSACOLA, FLORIDA 32526				
	egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another				
The name and the Florida street address	ss of the registered agent are:				
HON	NOR M. BELL SR.				
	Name				
6073 SPANISH OAK DRIVE					
Florida street address (P.O. Box <u>NOT</u> acceptable)					
PENSACOLA	32526 FL				
Ci	ity, State, and Zip				
Having heen named as registered are	nt and to accent 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

SECRETARY OF STATE DIVISION OF CORPORATIONS

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:					
PRESIDENT/CEO	HONOR M. BELL SR. 6073 SPANISH OAK DRIVE PENSACOLA, FLORIDA 32526					
						
	date of filing: 24 JULY 2009 (OPTIONAL) especific and cannot be more than five business days prior					
or 90 days after the date of filing.) 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.)						
	HONOR M. BELL SR. Typed or printed name of signee					
Filing Fees:	sed or printed name of signee					

\$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