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J. BRYAN

AUG 25 2009

EXAMINER

COVER LETTER

TO:

Registration Section

Division of C	Corporations			
SUBJECT:	Doran Wellir	ngton Development	6, LLC	
		ted Liability Company	·	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.		
Please return all corres	spondence concerning this ma	tter to the following:		
	l	Eugene Parrs		
		Name of Person		
	Han	vey & Battey, P.A.		
		Firm/Company		
	P	D Drawer 1107		S O
		Address		ECR A
	Beauf	ort, SC 29901-1107		BAUG 24 PH ECRETARY OF LAHASSEE, I
		ty/State and Zip Code		
	jpico	ciano@rpcpa.com		11.0
	E-mail address: (to be used	for future annual report notification	on)	57AT
For further information	n concerning this matter, pleas	e call:		
	gene Parrs		524-3109	
Name	e of Person	Area Code & Daytime	Telephone Number	
Enclosed is a check t	for the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed	\$160.00 Filin Certificate o Certified Co (additional cop	f Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Add Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions iter Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ie:	
nited Liability Compan	y is:
Doran Wellington [st end with the words "Limited	Development 6, LLC Liability Company," "L.L.C.," or "LLC.")
iress:	
s and street address of the	he principal office of the Limited Liability Company is:
ddress:	Mailing Address:
	4324 Hunting Trail
33467	Lake Worth, FL 33467
impany cannot serve as its own clive Florida registration.) lorida street address of	the registered agent are: F. Doran, Jr.
	lame ALI G
4324 H	Iunting Trail
	(P.O. Box NOT acceptable)
Lake Worth, FL 334	167 FL SS & O
City, St	ate, and Zip
y at the place designated d agree to act in this cap) the proper and comple	d to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all the performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S
	Doran Wellington Estend with the words "Limited diress: and street address of the diress: 33467 gistered Agent, Registed appropriate address of Thomas Note that the words "Limited diress: 13467 gistered Agent, Registed appropriate address of Thomas Note that the place designate and the place designate address of the proper and complete the proper and comple

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

Title: "MGR" = Manag "MGRM" = Man		Name and Address:	
MGRM		Thomas F. Doran, Jr. 4324 Hunting Trail Lake Worth, FL 33467	
MGRM	_	Casey Doran-Heatherly 1024 Cherry Lane Wellington, FL 33414	
	_		
	late, if other than the	e date of filing: (OP be specific and cannot be more than five busin	
CLE V: Effective deffective deffective date is list	late, if other than the ed, the date must be te of filing.)		
CLE V: Effective deffective date is list to days after the da	late, if other than the ed, the date must be te of filing.)		
CLE V: Effective deffective date is list to days after the da	late, if other than the ed, the date must be te of filing.) ENATURE: Signature of a member (In accordance with se	per or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury	
CLE V: Effective deffective date is list to days after the da	late, if other than the ed, the date must be te of filing.) SNATURE: Signature of a member of this document constitution the facts stated here.	per or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.) Thomas F. Doran, Jr.	
CLE V: Effective deffective deffective date is list to days after the da REQUIRED SIG	late, if other than the ed, the date must be te of filing.) SNATURE: Signature of a member of this document constitution the facts stated here.	per or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.)	09 AUG SECRETA TALL NHAS
CLE V: Effective deffective date is list to days after the da REQUIRED SIG	late, if other than the ed, the date must be te of filing.) SNATURE: Signature of a member of this document constitute facts stated be a state of the facts of the fa	per or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury erein are true.) Thomas F. Doran, Jr.	