

L09000083326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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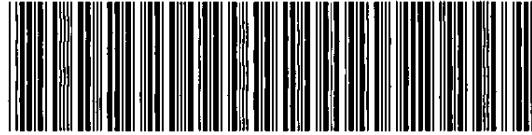
(Business Entity Name)

(Document Number)

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B. KOHR
AUG 28 2009
EXAMINER

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DIVISION OF CORPORATIONS
2009 AUG 28 AM 10:48
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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August 28, 2009

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Dixon Rentals, LLC

Filing Evidence

- ☒ Plain/Confirmation Copy
- ☐ Certified Copy

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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**ARTICLES OF ORGANIZATION OF
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME:

The name of the Limited Liability Company is: DIXON RENTALS,
LLC.

ARTICLE II - ADDRESS:

The mailing address and street address of the principal office
of the Limited Liability Company is:

Principal Office Address: 6960 Sable Ridge Lane
 Naples, Florida 34109

Mailing Address: 6960 Sable Ridge Lane
 Naples, Florida 34109


**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE & RESIDENT
AGENT'S SIGNATURE:**

The name of the initial registered agent of the organization
at that address is: DOUGLAS L. RANKIN, ESQ., located at 2335
Tamiami Trail North, Suite 308, in the City of Naples, County of
Collier, State of Florida.

Having been named as registered agent and to accept service of
process of 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

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with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.


DOUGLAS L. RANKIN

ARTICLE IV - MANAGING MEMBERS:

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

<u>NAME</u>	<u>TITLE</u>	<u>ADDRESS</u>
NANCY DIXON	MGRM	6960 Sable Ridge Lane Naples, Florida 34109
SHELLY DIXON	MGRM	6960 Sable Ridge Lane Naples, Florida 34109

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 27th day of August, 2009.

(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.)


NANCY DIXON, Managing Member


SHELLY DIXON, Managing Member