

209000085466

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

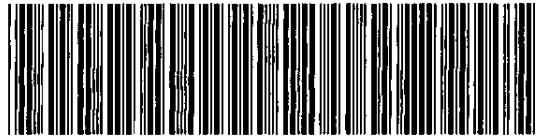
Special Instructions to Filing Officer:

A. LUNT

SEP - 3 2009

EXAMINER

Office Use Only



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09/02/09--01028--001 **310.00

FILED
2009 SEP - 2 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**GARY F. RITTER
ATTORNEY AT LAW
24341 COPPERLEAF BOULEVARD
BONITA SPRINGS, FLORIDA 34135
TEL: (239) 390-0081
gritteagle@aol.com**

August 31, 2009

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314


RE: LLC Formation

Dear Sir or Madam:

Enclosed please find forms to register DAB Properties of Southwest Florida, LLC and DAB Investments of Southwest Florida, LLC. I also enclose my check in the amount of \$310.00 for the filing fees for both entities. I also enclose a self addressed stamped envelope for the return of the certified copies.

Should you have any questions please advise.

Very truly yours,


Gary F. Ritter

GFR:r
enc

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DAB Properties of Southwest Florida, 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:

Gary F. Ritter, Esq.
Name of Person

Firm/Company

24341 Copperleaf Boulevard
Address

Bonita Springs, Florida 34135
City/State and Zip Code

gritteagle@aol.com
E-mail address: (to be used for future annual report notification)

2009 SEP +2 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Gary F. Ritter at (239) 390-0081
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DAB Properties of Southwest Florida, LLC

(Must end with the words "Limited Liability 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:

25563 Fenner Circle

Bonita Springs, FL 34135

25563 Fenner Circle

Bonita Springs, FL 34135

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

David Bukowski

Name

25563 Fenner Circle

Florida street address (P.O. Box **NOT** acceptable)

Bonita Springs, FL 34135 FL

City, State, and Zip

Having been named as registered agent and to accept 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..

David Bukowski

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

David Bukowski

25563 Fenner Circle

Bonita Springs, FL 34135

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 SEP -2 PM 2:00

FILED

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

David A Bukowski

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.)

David Bukowski

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)