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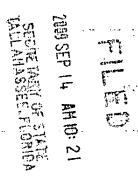
(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

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T. CLINE
SEP 1.5 2009

**EXAMINER** 

### **COVER LETTER**

то:	Registration : Division of C					
SUBJECT: DOWNTOWN TAXI LLC.						
50 <b>50</b> 0	<u></u>	Name of Limi	ted Liability Company		·· · · · · · · · · · · · · · · · · · ·	
The end	closed Articles o	of Organization and fee(s) are	submitted for filing.			
Please	return all corres	pondence concerning this ma	tter to the following:			
		ם	avid C. Jewett			
			Name of Person			
		DOW	NTOWN TAXI LLC.			
			Firm/Company			
		P	. O. Box 3452			
·			Address			
		Sarasota	a, Florida 34230-3452		SE SE	7089
		ty/State and Zip Code		聖書	VIBB SEP 14	
_	······································	Srqc E-mail address: (to be used	dttaxi@gmail.com for future annual report notification	n)	<u> </u>	
For fire	ther information	concerning this matter, pleas	·	,		777
1011111	mer mioritation	concerning uns matter, picas	e cair.		25	MUSC
		d C. Jewett	_at (941)	536-7855	371	7
	Name	of Person	Area Code & Daytime	Felephone Number	•	
Enclos	ed is a check f	or the following amount:	•			
<b>]\$</b> 125.0	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Fill Certificate Certified C	of Status Copy	&
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addr Registration Section Division of Corporati Clifton Building 2661 Executive Cent	ions		

Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	, s:				
DOWNTOWN	TAXI LLC.				
(Must end with the words "Limited Lia	bility 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:				
3223 Bee Ridge Rd.	P. O. Box 3452				
Suite 86	Sarasota, Florida 34230-3452				
Sarasota, Florida 34239					
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registrations entity with an active Florida registration.)	ed Office, & Registered Agent's Signature:				
The name and the Florida street address of the	e registered agent are:				
David C	. Jewett 55 5				
Nam	e 37 2				
3223 Bee Ri	dge Rd. #86				
Florida street address (P.					
Sarasota, Florida 3423	9 FL				
City, State,	· · · · · · · · · · · · · · · · · · ·				
	o accept service of process for the above stated limited a this certificate. I hereby accept the appointment as				

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)

#### 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: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR David C. Jewett 3223 Bee Ridge Rd. #86 Sarasota, Florida, 34239 (Use attachment if necessary) . (OPITIÓNATA **ARTICLE V:** Effective date, if other than the date of filing: (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:** 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.)

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)

David C. Jewett

Typed or printed name of signee