## L09000112342

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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B. KOHR
NOV 2 3 2009
EXAMINER

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Brown	Dog	Pro	Pelle	r LL	<u></u>
	J		1	-	•

OS MON 23 PH 1: 112

	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
:	L.C. File
	Fictitious Name File
• }	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
ong nature	Vehicle Search
	Driving Record
Requested by: 55 // // Z ////	UCC 1 or 3 File
Name Date Time	UCC 11 Search
value Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

		$\mathcal{O}_{\!\!L}$
ARTICLE I - Name:		OR FLORIDA LIMITED LIABILITY COMPANY
The name of the Limit	ed Liability Compa	any is:
· •	BROWN DOG	PROPELLER, LLC
(Must cr	nd with the words "Limit	ed Liability Company," "L.L.C.," or "LLC.")
ARTICLE II - Addre	<b>-</b> 66•	
The mailing address a	nd street address of	f the principal office of the Limited Liability Company is
Principal Office Add		Mailing Address:
Ринения Описе дао	1 6291	Tal State Control of the Control
405 DOVE LANE		405 DOVE LANE
SATELLITE BEACH	FL 32937	SATELLITE BEACH, EL 32937
ARTICLE III - Rogis	uny cannot serve as its ov	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an Individual or another
business entity with an active		
business entity with an active	ida street address o	of the registered agent are:
business entity with an active		of the registered agent are:
business entity with an active		•
business entity with an active	RONA	LD DUBINSKY
business entity with an active	RONA 405	Name
business entity with an active	RONA 405	Name  DOVE LANE  135 (P.O. Box NOT acceptable)

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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..

## 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" = Manag "MGRM" = Man		Name and Address:	
MGRM		RONALD DUBINSKY 405 DOVE LANE SATELLITE BEACH, FL. 32937	
	_		
(Use attachment	if necessary)		
ARTICLE V: Effective of an effective date is list to or 90 days after the date.	ted, the date must be spe	of filing: ecific and cannot be more than five	_, (OPTIONAL) business days prior
REQUIRED SIG	- A grad	Debuty Commentative of a phone	er.
	(In accordance with section (	508.408(3). Florida Statutes, the execution an affirmation under the penalties of periods	
	RON	ALD DUBINSKY	
Filing Foes	Typed o	r printed name of signee	<del></del>

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
5 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)