

**L100000017567**

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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP      WAIT      MAIL

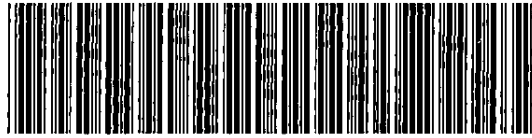
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



**100167764931**

**EFFECTIVE DATE**

2/2/10

02/05/10--01010--019 \*\*130.00

**FILED**  
**10 FEB -5 PM 2:58**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Dwight Oakley Architect PLLC.  
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:

Dwight Oakley  
Name of Person

Dwight Oakley Architect PLLC.  
Firm/Company

8080 Bayshore Drive  
Address

Naples Florida 34112  
City/State and Zip Code

oakleyx2@mac.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dwight Oakley at ( 239 ) 262-0073  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 8, 2010

DWIGHT OAKLEY  
8080 BAYSHORE DRIVE  
NAPLES, FL 34112

SUBJECT: DWIGHT OAKLEY ARCHITECT PLLC.  
Ref. Number: W10000006260

We have received your document for DWIGHT OAKLEY ARCHITECT PLLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 710A00003159

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Dwight Oakley Architect PLLC.

(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:**

8080 Bayshore Drive  
Naples, Florida 34112

**Mailing Address:**

same

**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:

Dwight Oakley  
Name  
8080 Bayshore Drive  
Florida street address (P.O. Box **NOT** acceptable)  
Naples FL 34112  
City, State, and Zip

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TALLAHASSEE, FLORIDA

*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..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**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:**

MGR

Dwight Oakley  
8080 Bayshore Drive  
Naples, FL 34112

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: Feb. 2, 2010 (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:**

  
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.)

Dwight Oakley  
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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 February, 2010

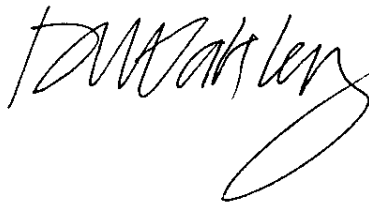
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: Nature of Business

With regard to the Articles of Organization for Florida Professional Limited Liability Company the Nature of Business

**Dwight Oakley Architect, PLLC.**

**The purposes for which this professional limited liability company is organized is to provide architectural services to individuals and businesses, and to engage in any other lawful business for which limited liability companies may be organized in this state.**



AR 001128

Dwight Oakley, Architect  
8080 Bayshore Drive  
Naples, Florida 34112  
239.262.0073

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA