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SECRETARY OF STATE

J. BRYAN

FEB 2 5 2009

EXAMINER

COVER LETTER

TO: Registratio Division of	n Section Corporations			
SUBJECT:	DAV	E'S WELDING,	LLC	
		ited Liability Company		
The enclosed Article	s of Organization and fee(s) are	submitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	ROBERT [AVID STEPHENS	3, SR.	i Ale
		Name of Person		EC TI
	DAVE	S WELDING, LL	С	FEB 24 PH 12: 59 ECRETARY OF STATE
		Firm/Company		Fig 3
	5386 266th STREET			
		Address		9 SEE
	BRAI	NFORD, FL. 3200	8	•
		ty/State and Zip Code		
		hens7@yahoo.co		
	E-mail address: (to be used	•	itification)	
For further information	on concerning this matter, pleas	e call:		
DAVI	E STEPHENS	at (386)	590-4128	
Nan	ne of Person		Paytime Telephone Numb	per
Enclosed is a check	for the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fe Certified Copy (additional copy is e	Certifica (nclosed)	Filing Fee, ate of Status & I Copy I copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courie Registration S Division of C Clifton Buildi 2661 Executiv Tallahassee, F	ection orporations ing ve Center Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam The name of the Lin	10 FEB 24		
	DAVE'S WELD	ING. LLC.	SERVE TO T
(Mus	st end with the words "Limited Liab		
ARTICLE II - Add The mailing address	dress: s and street address of the p	rincipal office of the Limit	ed Liability Company is:
Principal Office Ad	<u>ldress:</u>	Mailing Address:	
5386 266th STRE BRANFORD, FL. (5386 266th STREET BRANFORD, FL 320	08
ARTICLE III - Reg (The Limited Liability Con business entity with an ac	gistered Agent, Registered npany cannot serve as its own Registive Florida registration.)	d Office, & Registered Ag	gent's Signature: n individual or another
The name and the Fl	lorida street address of the	registered agent are:	
_	PAULA J. S ⁻		
_	6130 284th	· · · · · · · · · · · · · · · · · · ·	
	Florida street address (P.O	. Box NOT acceptable)	
_	BRANFORD, FL. 32008	FL	
_	City, State, a	nd 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..

Registered Agent's Signature (REQUIRED)

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or The name and address of each M	Managing Member(s): Manager or Managing Member is as follows:
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address: Name and Address: PH 7.5
MGR	ROBERT DAVID STEPHENS, SR. 5386 266th STREET BRANFORD, FL. 32008
MGRM	ROBERT DAVID STEPHENS, JR. 6122 284th STREET BRANFORD, FL. 32008
MGRM	PAULA J. STEPHENS 6130 284th STREET BRANFORD, FL. 32008
(Use attachment if necessary) TICLE V: Effective date, if other that an effective date is listed, the date must be 190 days after the date of filing.)	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	T flowed Stephens Str. ember or an authorized representative of a member.
of this document	ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ed herein are true.) Typed or printed name of signee

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)