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MAY 28 2010

**EXAMINER** 



## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: DRA Maintenance, 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:
Danny R. Alsobrooks
DRA Maintenance, LLC
5101 Osage Ct.
Address    OUNGSTOWN FL 32466     City/State and Zip Code     Vandy
For further information concerning this matter, please call:
For further information concerning this matter, please call:  Danny Alsobrooks at (850) 596-2397 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Enclosed is a check for the following amount:
□\$125.00 Filing Fee & Certificate of Status  □\$130.00 Filing Fee & Certificate of Status  □\$155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liab	ility Company is:	
DRA M	aintenance,	LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or LLC.")		

## **ARTICLE II - Address:**

**Principal Office Address:** 

**ARTICLE I - Name:** 

The mailing address and street address of the principal office of the Limited Liability Company is:

**Mailing Address:** 

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:  \[ \begin{align*} \text{Danny R. A-ISO borooks} \\ \text{Name} \\ \text{SIOI 05age G.} \\ \text{Florida street address (P.O. Box NOT acceptable)} \\ \text{Volume Stown FL 3-4466} \\ \text{City, State, and Zip} \\ \text{Having been named as registered agent and to accept service of process for the above stated limited} \end{align*}

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 Manager and address of each Manager	ger or Managing Member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
Danny R. Alsobrooks	5101 Osage ct. Youngstown Fr.
(Use attachment if necessary)	
	e date of filing: OGOO ( 100 . (OPTIONAL)  se specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	2810 HAY 27 SECRETARY FAEL AHASS
(In accordance with se	ction 608.408(3), Florida Statutes, the execution litutes an affirmation under the penalties of perjury

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)