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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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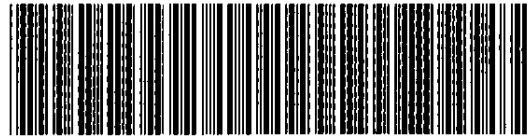
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

S. HAWKES

AUG 4 - 2010

EXAMINER



HARVEY & BATTEY, PA
— ATTORNEYS AT LAW —
SINCE 1922

P.O. DRAWER 1107 • 1001 CRAVEN STREET • BEAUFORT, SC 29901-1107
(843) 524-3109 • (843) 524-6973 FAX
www.harveyandbattey.com

W. BRANTLEY HARVEY, SR.
(1893-1981)
W. BRANTLEY HARVEY, JR.
COLDEN R. BATTEY, JR.
WILLIAM B. HARVEY, III
(SC Circuit Court Mediator)
JOHN M. TATUM, III

THOMAS C. DAVIS
THOMAS A. HOLLOWAY
(also admitted in PA and NJ)
EUGENE PARRS
(also admitted in NY, NC, FL and GA)
SHAWN L. REEVES
JOSEPH L. O'BRIEN

July 30, 2010

Florida Secretary of State
Registration Section
Division of Corporations
PO Box 6327
Tallahassee FL 32314

Re: Doran Wellington Development 8, LLC

Ladies and Gentlemen:

I enclose for filing the Articles of Organization for the above captioned limited liability company, as well as a separate form Cover Letter.

Our check for the \$160 filing fee is also enclosed.

Please file the Articles for this LLC. Call me if you have any questions.

Thank you.

Very truly yours,

Eugene Parrs
Fla. Bar. No. 0208094

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Doran Wellington Development 8, 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:

Eugene Parrs

Name of Person

Harvey & Battey, P.A.

Firm/Company

P.O. Drawer 1107

Address

Beaufort, SC 29901-1107

City/State and Zip Code

jpicciano@rpcpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eugene Parrs

Name of Person

at (843) 524-3109

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Doran Wellington Development 8, LLC

(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

Principal Office Address:

4324 Hunting Trail
Lake Worth, FL 33467

Mailing Address:

4324 Hunting Trail
Lake Worth, FL 33467

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:

Thomas F. Doran, Jr.

Name

4323 Hunting Trail

Florida street address (P.O. Box **NOT** acceptable)

Lake Worth

FL 33467

City, State, and Zip

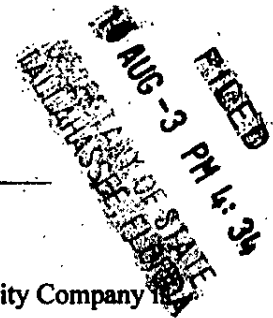
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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)

(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:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Thomas F. Doran, Jr.

4324 Hunting Trail

Lake Worth, FL 33467

MGRM

Cesay Doran-Heathery

1024 Cherry Lane

Wellington, FL 33414

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

Thomas F. Doran, Jr.

Typed or printed name of signer

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)

