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то:	Registration S Division of C			
SUBJ	ECT: DoraLy	vnn Books, LLC.	4.11.1220	
•		Name of Limi	ted Liability Company	
The en	nclosed Articles o	of Organization and fee(s) are	submitted for filing.	
Please	return all corresp	pondence concerning this ma	tter to the following:	
	D D			
	Sean Donne	elly	Name of Person	<u> </u>
			Name of reison	
				ماد دسا
			Firm/Company	2010 SEP SECRET ALLAHA
	1045 6th St.	N		OKE OKE
	1043 0111 31.	11.	Address	P 30
				1 mm
	St. Petersbu	rg, FL 33701		
			ty/State and Zip Code	
	sdonnelly_b	ookseller@yahoo.com	for future annual report notification)	<u> </u>
F 0		•	•	
For fu	rther information	concerning this matter, pleas	e call:	
Sear	n Donnelly		at (813)380-7993	
		of Person	Area Code & Daytime Teleph	one Number
Enclo	sed is a check for	or the following amount:		
□\$125	.00 Filing Fec	2\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	S160.00 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 Circ Tallahassee, FL 32301	cle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Compan	y is:		
DoraLynn Books, LLC.			
	Liability Company, "L.L.C.," or "LLC.")	· -	
ARTICLE II - Address:			
The mailing address and street address of the	he principal office of the Limited Lia	bility Company is:	
		• •	
Principal Office Address:	Mailing Address:		
15020 Madeira Way	1045 6th St. N.		
Madeira Beach, FL 33708	St. Petersburg, FL 33701		
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	ered Office, & Registered Agent's Registered Agent. You must designate an individ	Signature: lual or another	
The name and the Florida street address of	the registered agent are:	FIL 2010 SEP 30 SECRETARI	
Sean Donnelly		AR SP	
N	lame		
1045 6th St. N.		PH 1: 39 E. FLORIDA	
Florida stre	et address (P.O. Box NOT acceptable)	PM 1:39 OF STATE E. FLORIDI	
St. Petersburg, FL 337	01 _{FL}	을	
Cit	ry, State, and Zip	عنه	
Having been named as registered agent an	d to accept service of process for the a	shove stated limited	

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: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Sean Donnelly 1045 6th St. N. St. Petersburg, FL 33701 MGRM Harry Nash 4749 2nd Ave. N., Unit B St. Petersburg, FL 33713 (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:**

Sean Donnelly

Typed or printed name of signee

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

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)

that the facts stated herein are true.)