## 141000035716

| (Requ                                   | iestor's Name) |             |  |  |
|---|----------------|-------------|--|--|
| (Address)                               |                |             |  |  |
| (Addr                                   | ess)           |             |  |  |
| (City/s                                 | State/Zip/Phon | e #)        |  |  |
| PICK-UP                                 | ☐ WAIT         | MAIL MAIL   |  |  |
| (Business Entity Name)                  |                |             |  |  |
|   |                |             |  |  |
| (Document Number)                       |                |             |  |  |
| Certified Copies                        | Certificate    | s of Status |  |  |
| Special Instructions to Filing Officer: |                |             |  |  |
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ATHASSEE, PLONDA

D. BRUCE

MAR 24 2011

**EXAMINER** 

## **COVER LETTER**

| TO: Registrat Division SUBJECT: | of Corporations   | nwall, plasto  | ering, and stucco  |
|---------------------------------|---|--|--|
| SUBSECT:                        | Name of Limited Li  | ability Company  | J/ \-  |
| The enclosed Artic              | cles of Organization and fee(s) are subm  | uitted for filing.   |  |
| Please return all co            | orrespondence concerning this matter to   | the following:   |  |
|                                 | Brandon 50  | ames Doc   | lson_  |
|                                 | Firm  | n/Company  | <del></del>  |
| ·<br>(                          | 212 Greenles  | <b>^ ^ ^ -</b>   |  |
|                                 | Crawfordville   | e Florida  | 32327  |
| <del>.</del>                    | Barlow 8669  F-mail address: (to be used for fu   | te and Zip Code  Yahod  ture annual report notification)   | Com  |
| For further inform              | ation concerning this matter, please call   | :  |  |
| Branda                          | On Dod Son at a   | Area Code & Daytime Telepho  | 7422<br>one Number   |
| Enclosed is a che               | eck for the following amount:   |  |  |
| ▼\$125.00 Filing Fe             | e \$\int\\$130.00 Filing Fee & Certificate of Status  | Certified Copy (additional copy is enclosed)   | \$160.00 Filing Fee. Certificate of Status Certified Copy. (additional copy.) Fenciosed) |
|                                 | 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 | PH 2: 20 E. PLORIDA  |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

| Dodson's Drywall, plas (Must end with the words "Limited Liability   | tering and stucco L.L.   | <u></u>                                  |
|--|--|--|
| ARTICLE II - Address: The mailing address and street address of the prin   | ncipal office of the Limited Liability Com   | pany is:                                 |
| Principal Office Address:  210 Green ta Circle, Crawford ville Florida 32327   | Mailing Address:  212 Green leg Gifcle Crawfordville Florida 32327   | -  |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)  | Office, & Registered Agent's Signature red Agent. You must designate an individual or another  | <b>:</b>                                 |
| Crawfordville  | 0 ).   |  |
| Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered Agent's Signature. | nis certificate, I hereby accept the appointment. I further agree to comply with the provision formance of my duties, and I am familiar was tered agent as provided for in Chapter 608, and (REQUIRED) | ent as ons of all oith and F.S HAR 24 PH |
| (CONTINU<br>Page 1 of 2  | JED)   | 2: 20                                    |
| 10000  |  |  |

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

| <u>Title:</u> "MGR" = Manager   | Name and Address:  |
|---|--|
| "MGRM" = Managing Member  MGR M  MGR | Brandon Dodson, 212<br>Breenta Cir. Crawfordville<br>FL, 32327   |
|   |  |
|   |  |
|   |  |
| (Use attachment if necessary)   |  |
| RTICLE V: Effective date, if other than the an effective date is listed, the date must be or 90 days after the date of filing.)  REQUIRED SIGNATURE:  | e date of filing: (OPTIONAL)  oe specific and cannot be more than five business days prior   |
| Signature of a memb   | er or an authorized representative of a member.  |
| constitutes an affirmation under I am aware that any false infor constitutes a third degree felor   | 18.408(3), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. It is a provided for in s.817.155, F.S.)  Typed or printed name of signee |
| Filing Fees:  | Por R M  |
| \$125.00 Filing Fee for Articles of Org   | anization and Designation  |

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)