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D. BRUCE

JUN 17 2011

EXAMINER

COVER LETTER

٠.	Division of Corporations	
	SUBJECT: DANIEL A KNAPKE 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:	
	JOHN CULLUM	
	Name of Person	
	LAW OFFICE OF JOHN CULLUM	
	Firm/Company .	
	PO BOX 7901	
	Address	
	WESLEY CHAPEL FL 33545	
	City/State and Zip Code	
	JOHNC@WESLEYCHAPELLAWYER.COM	
	E-mail address: (to be used for future annual report notification)	-
	For further information concerning this matter, please call:	1
	JOHN CULLUM at (813) 997 9025	
	Name of Person Area Code & Daytime Telephone Number	
	Enclosed is a check for the following amount:	
\$	\$125.00 Filing Fee \$\scrip{\scrip{130.00 Filing Fee & Certified Copy}}\$ Certificate of Status (additional copy is enclosed) \$160.00 Filing Fee, 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 Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR DANIEL A. KNAPKE L.L.C., A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

٠,

The name of the Limited Liability Company is: DANIEL A KNAPKE LLC

ARTICLE II - Address:

The mailing address of the Limited Liability Company is P.O. Box 1584, Zephyrhills FL 33539, and the street address of the principal office of the Limited Liability Company is 39035 10th Ave., Zephyrhills FL 33542.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's signature:

The name and the Florida street address of the registered agent are:

Name:

Daniel A. Knapke 39035 10th Ave. Zephyrhills FL 33542

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

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:

Manager:

Daniel A. Knapke 39035 10th Ave. Zephyrhills FL 33542

ARTICLE V: Effective date, if other than the date of filing: NOT APPLICABLE.

SIGNATURE OF MEMBER:

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Daniel A. Knapke

