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SECRETARY OF STATE

COVER LETTER

TO:	Registration Section Division of Corporations		
SURI	ECT: Daphne Kesler Davis	LLC	
3000		mited Liability Company	
The er	nclosed Articles of Organization and fee(s) a	are submitted for filing.	
Please	return all correspondence concerning this n	natter to the following:	
	Daphne Kesler-Davis		
	Daprille Resier-Davis	Name of Person	
		Firm/Company	781 1AL
	3728 Briar Lane		2011 JUL SECRETI
		Address	ASS.
	Orange Park, Florida 32065		
	tamdap12@yahoo.com	City/State and Zip Code	STATI LORN
		ed for future annual report notification)	<u>⊅m</u> →
For fu	ther information concerning this matter, ple	ease call:	
Dap	nne Kesler-Davis	at (904) 291-7723	
	Name of Person	Area Code & Daytime Telephone Nun	mber
Enclo	sed is a check for the following amount:		
	Filing Fee \$\sqrt{130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & \$160.0 Certified Copy Certified Copy (additional copy is enclosed)	0 Filing Fee, cate of Status & ed Copy nal copy is enclosed)
	Mailing Address Registration Section Division of Corporation 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

ADTICLE	TALL
ARTICLE I - Name:	
The name of the Limited Liability Company	is:
Daphne Kesler Davis LLC	ARY I
(Must end with the words "Limited Lie	ability Company, "L.L.C.," or "LI.C.")
ARTICLE II - Address:	RE S
The mailing address and street address of the	principal office of the Limited Liability Empany is:
Principal Office Address:	Mailing Address:
3728 Briar Lane, Orange Park FL 32065	3728 Briar Lane, Orange Park FL 32065
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Repusiness entity with an active Florida registration.)	red Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
The name and the Florida street address of the	e registered agent are:
Daphne Kesler-Davis	S
Nan	ne .
3728 Briar Lane	
Florida street a	address (P.O. Box NOT acceptable)
Orange Park	_{FL} 32065
City,	State, and Zip
Having hour ramed as registered agent and t	a accent saming of process for the above 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 at registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

d Address:	7 23
	SEC
sler Davis Lane, Orange Park FL 320	mo 🕏
	STATE
annot be more than fi	(OPTIONAL ve business days
T'S	
d representative of a men	nber.
	zed representative of a men Statutes, the execution of thi

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.)

Daphne Kesler-Davis

Typed or printed name of signee

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)