

L11000085232

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300209954263

07/15/11--01020--012 **130.00

FILED

11 JUL 22 AM 7:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W11-37602
J. BRYAN

JUL 25 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DBI BUILDERS, 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:

Jo ANN C VALLEE

Name of Person

DBI BUILDERS, LLC

Firm/Company

30144 EAST STATE ROAD 78

Address

OKEECHOBEE, FL 34974

City/State and Zip Code

BHRJOEY@HOTMAIL.COM

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

FILED
11 JUL 22 AM 7:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Jo ANN C VALLEE

Name of Person

at (561) 723-2104

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 18, 2011

JO ANN C VALLEE
DBI BUILDERS, LLC
30144 EAST STATE ROAD 78
OKEECHOBEE, FL 34974

SUBJECT: DBI BUILDERS, LLC
Ref. Number: W11000037602

ATTACHED
#2
11 JUL 22 AM 7:00
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for DBI BUILDERS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

1. The registered agent must sign accepting the designation. *Done - sorry!*
2. The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit *Done* letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is #P02000067287, DBI BUILDERS, INC..

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 111A00016929

DBI Builders, Inc.
30144 E State Road 78 - BHR
Okeechobee, FL 34974

July 1, 2011

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Dissolution of DBI Builders, Inc.
Attn: Joey Bryan, Regulatory Specialist II

Gentlemen/Ladies:

In your Letter Number 111A00016929,

Please be advised that DBI Builders, Inc. suffered due to the economy and was dissolved, and has no intention of reinstating, which therefore releases the name for use to another entity.

Sincerely,



JoAnn C Vallee, Registered Agent
Secretary/Treasurer of DBI Builders, Inc.

DBI/jcv

FILED
11 JUL 22 AM 7:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DBI BUILDERS, 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 is:

Principal Office Address:

30144 EAST STATE ROAD 78
OKEECHOBEE, FL 34974

Mailing Address:

SAME

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:

JoANN C VALLEE

Name


30144 EAST STATE ROAD 78

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

OKEECHOBEE FL 34974

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)

FILED
JUL 22 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

DOUGLAS H BRAMER
899 SCOTT DRIVE
WEST PALM BEACH, FL 33415

MGR

DEAN H BRAMER
899 SCOTT DRIVE
WEST PALM BEACH, FL 33415

MGR

Jo ANN C VALLEE
30144 EAST STATE ROAD 78
OKEECHOBEE, FL 34974

(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. 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.)

Jo ANN C VALLEE

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)