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SECRETARY OF STATE
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C. LEWIS

AUG 2 5 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Diamond Duck Entrprises, 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:	
Richelle Myers Name of Person	
Dramond Duck Enterprises, LLC Firm/Company	
3218 Belmont Blud. Address	
SavaSata, FL 34232 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Prichelle Myers at (941) 879-1616 Name of Person at (941) 879-1616 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee & Certificate of Statu Certified Copy (additional copy is enclosed)	s &
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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Must end with the words "Limited Liability Company, "L.L.C.," or "L.C.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

3218 Relmont RIVO.

Savarota, FL 34232

Savarota, FL 34232

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:

Richelle Myers

Name S

Name S

Plorida street address (P.O. Box NOT acceptable)

Sevesch FL 34332

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

ARTICLE IV- Manager(s) or Man	aging Member(s):	,
The name and address of each Manag	ger or Managing Member is as follows:	2011 AUG 24 AM 16
<u>Title:</u> "MGR" ≈ Manager "MGRM" = Managing Member	Name and Address:	SECRETARY OF ST TALLAHASSEE. FLO
MGR	Richelle Myers 3218 Belmont Bli Sarasota, FL 3	1d. 4232
(Use attachment if necessary)		
LE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)	date of filing: 8/8/11 e specific and cannot be more than five	(OPTIONAL) business days prior
REQUIRED SIGNATURE:		
	WCA	_ .
Signature of a membe	r or an authorized representative of a member	er,

(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

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)

constitutes a third degree felony as provided for in s.817.155, F.S.)