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2011 SEP 26 PM 1: 05
SECRETARY OF STATE

C. LEWIS SEP 2.7 2011 EXAMINER

# COVERLETTER

TO: Registration Section
Division of Corporations

SUBJECT: DOOLEYMACK CONSTRUCTORS OF S.W. FLORIDA, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filling.

Please return all correspondence concerning this matter to the following

reserantial onespitate ortaining institute to the tolowing				
GLYNS GLEASON CORDEIRO				
Name of Person				
DOOLEYMACK CONSTRUCTORS, INC.				
Firm/Company				
5800 LAKEWOOD RANCHBLVD				
Address				
SARASOTA, FLORIDA 34240				
City/State and Zip Code				
GGLEASON@DOCLEYMACK.COM				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
GLYNS GLEASON CORDEIRO	at (941 809-1870			
Name of Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount:				
\$125.00 Filing Fee \$\sum \text{\$130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy			
	(additional copy is enclosed)			
Mailing Ackiress	Street/Charier Address			
Registration Section Division of Corporations	Registration Section Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
	Tallahassee, FL 32301			

## ARIICLES OF CREANZATION FOR FLORIDALIM TEDLIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

# DOOLEYMACK CONSTRUCTORS OF S.W. FLORIDA LLC

(Must end with the words "Limited Liability Company, "LLC," or "I.I.C.")

### ARTICLE II - Address:

**Principal Office Address:** 

5800 LAKEWOOD RANCH BLVD

SARASOTA FLORIDA 34240

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

**Mailing Address:** 

5800 LAKEWOOD RANCH BLVD SARASOTA, FLORIDA 34240

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individualistic service sentity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	77. 27.
WENDYL MACK	ZOII S SEC
Name	ARCHE SE
5800 LAKEWOOD RANCH BL.VD.	26 ARY
Florida street address (P.O. Box <u>NOT</u> acceptable)	
SARASOTA, <sub>FL</sub> 34240	FLO FLO
City, State, and Zip	PRID RID

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 amfamiliar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (RBQUIRED)

(CONTINUED)

Page 1 of 2

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

FILED

The name and address of each Mana	ger or Managing Member is as follow	vs:	
<u>Title:</u>	Name and Address:	2011 SEP 26 PM 1: 05	
'MCR"=Manager		SECRETARY OF STATE	
"MORM" = Managing Member		TALLAHASSEE, FLORIDA	
MORM	CHARLESH EVANS	. <u></u> .	
	5800 LAKEWOOD RANCH BLVD		
	SARASOTA, FLORIDA 34240		
MGR	KETHOOUTER		
	5800 LAKEWOOD RANCHBLVD		
	SARASOTA FLORIDA 34240	<del></del>	
MGR	WENDYL MACK		
	5800 LAKEWOOD RANCH BLVD		
	SARASOTA, FLORIDA 34240		
(Use attachment if necessary)			
OLEV: Effective date, if other than the	adota of filing	(OPTIONAL)	
effective date is listed, the date must b	e specific and cannot be more than t	(Or not val.)  five business days prior	
days after the date of filing)			
REQUIRED SIGNATURE:			
11.	$2\mathcal{M}$		
1/4/	// / /		

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 armaware 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.)

WENDYL MACK

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)