11000117719

(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



600213153246

10/13/11--01027--001 **130.00

Effective Date 10/10/11

2011 OCT 13 AM 10: 58
SECKETARY OF STATE

T. HAMPTON
DOT 1.4 2011
EXAMINER

COVER LETTER

1 TO:

Registration Section

Division of Corporations
SUBJECT: DSJ Development Services, 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:
Dale S. Jones, Jr.
Name of Person
DSJ Development Services, LLC.
Firm/Company
11828 Easthampton Drive
Address
Tampa, Florida 33626
City/State and Zip Code
chip@dsjdevelopment.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Dale Jones, Jr. at (813) 505-4825
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum_{\text{Certificate of Status}}\$130.00 Filing Fee \$\text{Certified Copy}\$ Certificate of Status \$\text{Certified Copy}\$ (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

10/10/11 Effective Date

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	3:

DSJ Develpment Services, LLC.
(Must and with the words "Limited Lightlity Company "L. L.C." or "L. L.C.")

(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
11828 Easthampton Drive Tampa, Florida 33626	11828 Easthampton Drive Tampa, Florida 33626
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the interest of the i	stered Agent. You must designate an individual or another
Dale S. Jones, Jr.	
Name	
11828 Easthamp	ton Drive
Florida street address (P.O. Box NOT acceptable)	
Tampa	_{FL} 33626
City, St	ate, and Zip
liability company at the place designated in t	accept service of process for the above stated limited 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)

Page 1 of 2

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:
MGR M	Dale S. Jones, Jr. 11828 Easthampton Drive Tampa, Florida 33626
	
(Use attachment if necessary)	
	e date of filing: October 10, 2011 (OPTIONAL) to specific and cannot be more than five business days prior
<u>REQUIRED</u> SIGNATURE:	
Signature of a member	er or an authorized representative of a member.
constitutes an affirmation unde I am aware that any false inform	3.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)
Dale S. Jones	s, Jr.

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)

Page 2 of 2

Typed or printed name of signee