

From:

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H11000257655 3)))



H110002576553ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.  
Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : COURT ACCESS CENTERS OF AMERICA  
Account Number : 075350000541  
Phone : (813) 875-1333  
Fax Number : (813) 200-1050

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: donna.franson@yahoo.com

RECEIVED  
11 OCT 27 AM 10:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.  
Dudley, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

FILED  
11 OCT 27 PM 12:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

G. MCLEOD

OCT 28 2011

Audit # H11000257655

**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

**ARTICLE I**

**Name and Address**

The name of this Limited Liability Company is:

**Dudley, LLC**

The mailing address and street address of the Limited Liability Company are:

**8686 Querce Ct.  
Naples, FL 34114**

**ARTICLE II**

**Term of Existence**

This Limited Liability Company shall have perpetual existence, commencing upon the date of filing of these Articles with the Florida Department of State.

**ARTICLE III**

**Purpose and Powers**

This Limited Liability Company is organized for the purpose of transacting any and all lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

**ARTICLE IV**

**Powers**

The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida.

This form was prepared with the assistance of CourtAccess Centers of America, Inc., a non-lawyer located at 3812 W Linebaugh Ave., Suite 102, Tampa, FL 33618, 813-875-1333.

FILED  
11 OCT 27 PM 12:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

From:

10/27/2011 10:18

#067 P.003/004

Audit # H11000257655

**ARTICLE V**  
**Initial Registered Office and Agent**

The street address of the initial registered office of this Limited Liability Company is:

**8686 Querce Ct.  
Naples, FL 34114**

and the name of its registered agent at such address is:

**Donna Franson**

**ARTICLE VI**  
**Management**

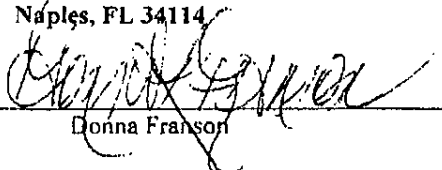
This Limited Liability Company shall have Two Manager(s) or Managing Member(s).  
The name and address of Manager(s) or Managing Member(s) are:

**Name and Address**

**Donna Franson, Managing Member  
8686 Querce Ct.  
Naples, FL 34114**

**James Griffith Jr., Managing Member  
8686 Querce Ct.  
Naples, FL 34114**

Dated: Thursday, October 27, 2011

  
Donna Franson

Audit # 1111000257655

From:

10/27/2011 10:18

#067 P.004/004

Audit # H11000257655

**ACCEPTANCE BY REGISTERED AGENT**

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.

Date: October 27, 2011

  
\_\_\_\_\_  
Donna Pranson

Audit # H11000257655