L11000137701

(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



900214886989

12/06/11--01019--012 **130.00

EFFECTIVE DATE 12-1-11

11 DEC -5 AHH: 47
SLUM: AHASSEE FLORIDA

B. BOSTICK
DEC - 7 2011
EXAMINER

COVER LETTER

Division of C	Corporations					
SUBJECT: D&	D Welding & Main	tenance L	.LC			
	Name of Limi	ted Liability Com	pany			
The enclosed Articles	of Organization and fee(s) are	submitted for fili	ng.			
Please return all corre	spondence concerning this mat	ter to the following	ng:			
David W	/. Moses					
		Name of Person				
D&DW	Velding & Mainten	ance LLC				
		Firm/Company				
3533 Ste	earns Park Road					
		Address				_
Valrico, F	lorida 33596			Σσ		
	Ci	y/State and Zip Co	de	A.S.	330	t in the
	E-mail address: (to be used	for future annual re-	port notification)	5	(-) 	
For forth or in formation			port notification)	Ολ 1717 - 1717 -	<u>م</u>	:
ror turther imormation	n concerning this matter, pleas	e can;		<u> </u>		
David W. Mose	s	_ _{at (} 813	770-0111		<u>-</u> -و.	
Nam	e of Person		de & Daytime Tele	phone Number		
Enclosed is a check	for the following amount:					
\$125.00 Filing Fee	\$130.00/Filing Fee & Certificate of Status	\$155.00 File Certified Co (additional co		\$160.00 Filing Certificate of S Certified Copy (additional copy i	Status &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton 2661 Ex	Courier Address tion Section n of Corporations Building secutive Center C ssee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

D & D Welding & Mainten	•	
(Must end with the words "Limi	ted Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address o	f the principal office of the Limite	ed Liability Company is:
Principal Office Address:	Mailing Address:	
3533 Stearns Park Road	3533 Stearns Park Road	Ė
Valrico, Florida	Valrico, Florida	
33596	33596	
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.)		individual or another
The name and the Florida street address	of the registered agent are:	11 DEC :
David W. Moses		AF DEC TO
	Name .	
3533 Stearns	Park Road	

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..

City, State, and Zip

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

Registered Agent's Signature (REQUIRED)

Valrico

(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGR	Sarah A. Moses	
	3533 Stearns Park Road	
	Valrico, Florida 33596	
MGRM	David W. Moses	******
	3533 Stearns Park Road	1- G.
	Valrico, Florida 33596	[a]
		<u> </u>
		<u> </u>
		<u> </u>
		
Use attachment if necessary)		·
ose attachment if necessary)		
E V: Effective date, if other than the	he date of filing: 12/1/2011	(OPTIO
EV: Effective date, if other than the date is listed, the date must	he date of filing: 12/1/2011 be specific and cannot be more that	
ective date is listed, the date must	he date of filing: 12/1/2011 be specific and cannot be more that	
fective date is listed, the date must	he date of filing: 12/1/2011 be specific and cannot be more than	
fective date is listed, the date must days after the date of filing.)	he date of filing: 12/1/2011 be specific and cannot be more than	
LE V: Effective date, if other than the fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:	he date of filing: 12/1/2011 be specific and cannot be more than	
fective date is listed, the date must days after the date of filing.)	he date of filing: 12/1/2011 be specific and cannot be more than	
fective date is listed, the date must days after the date of filing.)	he date of filing: 12/1/2011 be specific and cannot be more than	
fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more that	n five business
fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem	be specific and cannot be more that March March March Description March Descr	n five business
ective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem (In accordance with section 6	be specific and cannot be more that	n five business of this document

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.)

Typed or printed name of signee