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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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D. BRUCE
JAN 0 6 2019
EXAMINER

COVER LETTER

TO: Registration S Division of Co			•	
SUBJECT: D. P.	Haines LLC			
	Name of Limited L	iability Company		
The enclosed Articles of	Organization and fee(s) are subr	nitted for filing.		
Please return all correspondent	ondence concerning this matter to	the following:		
Daniel P	Haines			
Danieri		ne of Person		
ם ם ב	noo II C			
D.P. Hai		m/Company		
		company		
4214 Ba	rret Ave			
		Address		12
Plant City, F	-I 33566		के के विश्व संस्था	12 JAN -4
		ate and Zip Code	ASS.	1
dannyp8@v	verizon.net		ḿ≺ ™e.	
	E-mail address: (to be used for fi	iture annual report notification)	<u> </u>	بن (دنب (
For further information of	concerning this matter, please cal	l:		ආ ආ
Daniel Haines		912 707 000	0m >	S
	of Person at	(813 707-099) Area Code & Daytime Tele		
		Anda code de Dayamie Tele		
Enclosed is a check fo	r the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fe Certificate of Statu Certified Copy (additional copy is enc	ıs &
	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 C Tallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	Т	TC	L	E	I	-		a	m	e	
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The name of the Limited Liability Company is:

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

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
4214 Barret Ave.	4214 Barret Ave
Plant City, FI 33566	Plant City, FI 33566
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re	ered Agent. You must designate an individual of another $ abla$
Daniel P. Haines	
Name	
4214 Barret Ave	- ANI
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
Plant City	_{FL} 33566
City, Sta	te, 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)

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Daniel P. Haines 4214 Barret Ave Plant City, FI 33566
(Use attachment if necessary)	
	e date of filing: January 1, 2012 . (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Daniel	Plane
Signature of a memb	er or an authorized representative of a member.
constitutes an affirmation und I am aware that any false info	8.408(3), Florida Statutes, the execution of this document: er the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State mation submitted in s.817.155, F.S.)
Daniel P. Hai	
T	yped or printed name of signee
Filing Fees:	9

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)