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EXAMINER



COVER LETTER

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CUDII	ZCT.	Dickinson Glo	obal I	Enterpi	rises.	LLC		
SUBJI	:C1:	Name of Limite						
The en	closed Articles	of Organization and fee(s) are s	submitte	d for filing.				
Please	return all corres	spondence concerning this matte	er to the	following:				
			ila D	ickinso	on			
		Dickinson Glo	obal Firm/Co		rises,	LLC		
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				FL 346 Id Zip Code	08		******	
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•		E-mail address: (to be used for	or future	annual report	t notificatio	n)		
For fur	ther information	n concerning this matter, please	call:					
		a Dickinson	_ at (813		610-2982		
	Namo	e of Person		Area Code &	& Daytime	Telephone Num	ber	
Enclos	ed is a check t	for the following amount:						
\$125.00	Filing Fee [\$130.00 Filing Fee & Certificate of Status	Cer	5.00 Filing tified Copy itional copy i	y y	Certifica Certified	Filing Fo ate of Stat d Copy al copy is en	us &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street/Cou Registration Division of Clifton But 2661 Exect Tallahassed	n Section f Corporat ilding utive Cent	ions er Circle	STATE OF THE STATE	7012 WR 26

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	CI	Ľ	1 _	Na	ma
м	K I		4 P	_	11/1	1416.:

The name of the Limited Liability Company is:

Dickinson Global Enterprises, LLC

(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:

Mailing Address:	
10156 Eustace St.	
Spring Hill, FL 34608	
	10156 Eustace St.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Jessila D	Dickinson
Name	e
10156 Eu	stace St.
Florida street ac	ddress (P.O. Box NOT acceptable)
Spring Hill	_{FL} 34608
City, S	State, 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

ARTÍCLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	Jessila Dickinson	
	10156 Eustace St.	
	Spring Hill, FL 34608	
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of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)