L12000088838

(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

B. KOHR

JUL - 9 2012

EXAMINER

500237100935

07/05/12--01006--020 **130.00

EFFECTIVE DATE 6/27/2012

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUL -5 PM 3:54

COVER LETTER

TO: Registration Section
Division of Corporations

EFFECTIVE DATE 6/27/2012

SUBJECT: D and E INStallers 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:

FILED
12 JUN 27 PM 3:54
SECRETARY OF STATE
DIVISION OF CORPORATIONS

David Endicott MGR Ezra Barnett MGR
Name of Person

D and E Installers LLC
Firm/Company

5147 SW 113TH, LN
Address

Lake Butler Florda 32054-8093
City/State and Zip Code

david58w@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Endicott at (567) 224-7080
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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 Circle
Tallahassee, FL 32301

EFFECTIVE DATE 6/27/2012

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUL -5 PM 3:54

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

D and E Installers Limited Liability company
(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:**
D and E Installers LLC	
5147 SW 113th Ln	
Lake Butler FL 32054	

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:

Marvin Seay
Name

12034 Patton St
Florida street address (P.O. Box **NOT** acceptable)

Worthington FL 32697
City, 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..

Marvin Seay
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Title:	**Name and Address:**
"MGR" = Manager "MGRM" = Managing Member	
MGR	David Endicott 5147 SW 113th Ln Lake Butler, FL 32054-8093
MGRM	Ezra Barnett 5147 SW 113th Ln Lake Butler 32054-8093

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 6-27-12. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

David w Endicott
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

David ENDicott
Typed or printed name of signee

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)