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COVER LETTER

TO:

Registration Section Division of Corporations

Susan C. Dubois, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all corresp	ondence concerning this mat	ter to the following:	
Susan	C. Dubois		
		Name of Person	
		Firm/Company	
1179 K	ehau Place		
		Address	
Makaw	ao, HI 96768		
	Ci	ty/State and Zip Code	
kehaupl@)yahoo.com		
	E-mail address: (to be used	for future annual report notification)	
For further information	concerning this matter, please	e call:	
Susan C. I	Dubois	at 808 214-4	104
Name	of Person	Area Code & Daytime Tele	
Enclosed is a check f	or 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	Street/Courier Address Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The mailing address and street address of the principal office of the Limited Liability Company Principal Office Address: Mailing Address:	Susan C. Dubois, LLC	
	(Must end with the words "Lir	nited Liability Company, "L.L.C.," or "LLC.")
Susan C. Dubois 1179 Kehau Place, Makawao, HI 96768	-	

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

Linda Wakefield	•
Nar	me
1742 Binney Drive	
Florida street	address (P.O. Box NOT acceptable)
Hutchinson Island,	_{FL} 34949
City,	State, and Zip

NATE: 33

Stated limited intment as

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:

Title:		Name and Address:	
"MGR" = Mana "MGRM" = Ma	ger naging Member		
MGRM		Susan C. Dubois	
**************************************	_	1179 Kehau Place	
		Makawao, HI 96768	_
MGRM		Linda C. Wakefield	
		1742 Binney Drive	_
		Hutchinson Island, FL 34949	- -
MGRM		Bobby Grupe	
	_	2558 East Westcott Drive	_
		Phoenix, AZ 85050	
MGRM		Candy Eaton	
		356 NW 144th Drive	_
		Okeechobee, FL 34972	_
	e date, if other than the d	late of filing: February 1, 2013 . (OPTI be specific and cannot be more than five but	
<u>REQUIRED</u> SI	GNATURE:		2013 TAL
	Signature of a member	or an authorized representative of a member.	量置
consti I am a	tutes an affirmation under the tware that any false informate	08(3), Florida Statutes, the execution of this document ne penalties of perjury that the facts stated herein are truction submitted in a document to the Department of States provided for in s.817.155, F.S.)	FILED WITS
	Linda C. Wakefield		震 %
	Type	ed or printed name of signee	79

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)