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SECRETARY OF STATE

(850) 245-6051.

COVER LETTER

TO:

Registration Section **Division of Corporations**

DORSEY HANDYMAN LLC

Name of Limited Liability Company

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

| Please return all correspo | ondence concerning this matte | er to the following: | | |
|----------------------------|---|--|---------------------------|--|
| ALEX [| ORSEY | | | |
| | | Name of Person | | |
| JESS E | ORSEY HA | NDYMAN | LLC | |
| 7061 E | ADIE COTTO | Firm/Company ON RD | | |
| - | | Address | | |
| BAKER | , FL 32531 | | | |
| N/A | Cit E-mail address: (to be used f | y/State and Zip Code | fication) | |
| For further information c | oncerning this matter, please | • | | |
| ALEX DOF | RSEY | _{at} 850 75 | 58-70 | 50 |
| Name o | of Person | Area Code & Da | ytime Telepl | none Number |
| 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 en | | \$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 Registration Se Division of Co Clifton Buildin 2661 Executive | ction rporations ng | rcle |

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Na | ime: | • | |
|--|--|--|--|
| The name of the I | Limited Liability Compan | ny is: | |
| | | | |
| JESS DORSEY H | | | |
| (N | flust end with the words "Limited | Liability Company, "L.L.C.," or "LLC.") | |
| ARTICLE II - A | ddress | | |
| | | he principal office of the Limited Liability Company is: | |
| J | | | |
| Principal Office | Address: | Mailing Address: | |
| 7061 EADIE COT | TON RD | 7061 EADIE COTTON RD | |
| BAKER, FL 3253 | | BAKER, FL 32531 | |
| | | | |
| | | | |
| (The Limited Liability (business entity with an | Company cannot serve as its own active Florida registration.) | tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another | |
| The name and the | Florida street address of | the registered agent are: | |
| | ALEX DORSEY | | |
| | ? | Name | |
| | 7061 EADIE COTTON | RD | |
| | Florida stre | Florida street address (P.O. Box NOT acceptable) | |
| | BAKER | _{FL} 32531 | |
| | Ci | ity, State, and Zip | |
| liability compo registered agent all statutes rela | any at the place designate t and agree to act in this c ting to the proper and coi | nd to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as appacity. I further agree to comply with the provisions of amplete performance of my duties, and I am familiar with as registered agent as provided for in Chapter 608, F.S | |
| | alex Dark | Signature (REQUIRED) | |
| | Registered Agent's | Signame (Kedorken) | |

(CONTINUED)

Page 1 of 2

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13 FEB 18 PH 1: 11

SECRETARY OF STATE

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

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

| <u> Title:</u> | Name and Address: | |
|--------------------------|---------------------------------------|--|
| "MGR" = Manager | | |
| "MGRM" = Managing Member | | |
| | · | |
| "MGR" 100% | ALEX DORSEY | |
| | 7061 EADIE COTTON RD | |
| | BAKER, FL 32531 | |
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: <u>FEBRUARY 15, 2013</u>. (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:

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.)

ALEX DORSEY

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)