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PICK-UP	WAIT MAIL
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J. SAULSBERRY EXAMINER

APR ... 8 2013

(850) 245-6051.

## **COVER LETTER**

TO:	Registration S Division of Co					
SUBJE	·CT·	DRG	SC, LLC			
SOBIL		Name of Limi	ted Liability Company	· · · · · ·		
The end	closed Articles of	of Organization and fee(s) are	submitted for filing.			
Please r	eturn all corres	pondence concerning this mat	ter to the following:			
		Steph	nen C. Daws			
-		•	Name of Person			
_			Firm/Company			
3981 Baum Road						
_	Address					
		Tallahas	see, FL 32309	ا الله الله الله الله الله الله الله ال	2013 APR -	
•			ty/State and Zip Code	50	<del>8</del> 8	
_			raglovercpa.com		P.	
		·	for future annual report notification)	(T)	01 STATE .0	
For furt	her information	concerning this matter, pleas		7	ien <b>o</b>	
S	tephen	C. Daws	at ( 850 ) 545 -	4748		
	Name	of Person	Area Code & Daytime Telep	hone Number		
Enclose	ed is a check f	or the following amount:				
■\$125.0	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing F Certificate of Sta Certified Copy (additional copy is e	itus &	
		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	ircle		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	DRGC, LLC	
(Must end with th	he words "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and stree	et address of the principal office of the Limited Liability Cor	mpany is:
Principal Office Address:	Mailing Address:	
3981 Baum Road	3981 Baum Road	
Tallahassee, FL 32309	Tallahassee, FL 32309	
The name and the Florida stre	eet address of the registered agent are:  Stephen C. Daws  Name  3981 Baum Road  Florida street address (P.O. Box NOT acceptable)	APR -8 PH 12: 10
	tional short and ross (tion son <u>root</u> acceptance)	
<del></del>		
		٥

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Stephen C. Daws
	3981 Baum Road
	Tallahassee, FL 32309
<del> </del>	
	APR
	ر المراقب الم
	<u> </u>
(Use attachment if necessary)	
LE V: Effective date, if other th	an the date of filing: (OPTIONA
LE V: Effective date, if other th	an the date of filing: (OPTIONA must be specific and cannot be more than five busines
nective date is listed, the date or 90 days after the date of fili  REQUIRED SIGNATURE:	ing.)
or 90 days after the date of fili	ing.)
or 90 days after the date of fili	ty W
or 90 days after the date of fili REQUIRED SIGNATURE:	member or an authorized representative of a member.
or 90 days after the date of fili  REQUIRED SIGNATURE:  Signature of a reconstitutes an affirmation I am aware that any false	ti W
or 90 days after the date of fili  REQUIRED SIGNATURE:  Signature of a reconstitutes an affirmation I am aware that any false	member or an authorized representative of a member.  ion 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. In the information submitted in a document to the Department of State

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)