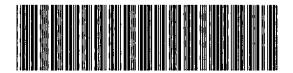
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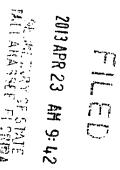
| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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J. SAULSBERRY EXAMINER

APR 25 2013

(850) 245-6051.

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT

D&D Investments of Southwest Florida, 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:

| Please return all corresp | ondence concerning this matt | er to the following: | |
|--|--|---|--|
| Kurt S. | Bauer | | |
| | | Name of Person | |
| Buckma | an MacDonald | d Bauer & Brov | vn |
| | | Firm/Company | |
| 217 Ea | st 24th Street | Suite 201 | |
| - | | Address | 201 |
| Holland | l, Michigan 49 | 9423 | 2013 APR |
| | | y/State and Zip Code | 23 |
| bauer@bi | mbpc.com | | And the second |
| | E-mail address: (to be used to | or future annual report notification | |
| For further information | concerning this matter, please | call: | 9: 42 |
| Kurt S. Ba | uer | at (616) 394-4 | · · · · · · · · · · · · · · · · · |
| Name | of Person | Area Code & Daytime To | elephone Number |
| 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 Addre Registration Section | |
| | Division of Corporations | Division of Corporation | ons |

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| | TORT LOND/Y ERVINED ER | |
|--|--|--|
| ARTICLE I - Name: The name of the Limited Liability Con | npany is: | |
| D&D Investments of Southwest Florida, LLC | | |
| (Must end with the words "Li | mited Liability Company, "L.L.C.," or "LLC." |) |
| ARTICLE II - Address: The mailing address and street address | of the principal office of the Limit | ed Liability Company is: |
| Principal Office Address: | Mailing Address: | |
| 597 Bal Harbor | 597 Bal Harbor | |
| Punta Gorda, FL 33950 | Punta Gorda, FL 33950 | <u> </u> |
| ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street address Douglas E. DenBoer | s own Registered Agent. You must designate an) | n individual or another |
| 597 Bal Harbor | | |
| | a street address (P.O. Box NOT acceptable | le) |
| Punta Gorda, FL | | |
| | City, State, and Zip | |
| registered agent and agree to act in tall statutes relating to the proper and accept the obligations of my positive acceptance and accept the obligations of my positive acceptance and acceptance acceptance and acceptance acceptance acceptance acceptance and acceptance ac | nated in this certificate, I hereby act his capacity. I further agree to come decomplete performance of my dutiention as registered agent as provided ent's Signature (REQUIRED) | cept the appointment as ply with the provisions of s, and I am familia |
| · · · · · · · · · · · · · · · · · · · | CONTINITEDI | P> ► () |

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" = Manager | |
| "MGRM" = Managing Member | r |
| MGR | M&D Ventures of Southwest Florida, LLC |
| | 597 Bal Harbor |
| | Punta Gorda, FL 33950 |
| | |
| MGR | Douglas E. DenBoer |
| | 2451 Van Ommen Drive, Suite B |
| | Holland, MI 49424 |
| | |
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| (Use attachment if necessary) CLE V: Effective date, if other the | nan the date of filing: (OPTIONA |
| CLE V: Effective date, if other the | e must be specific and cannot be more than five busines |
| CLE V: Effective date, if other the | e must be specific and cannot be more than five busines |
| CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of fil REQUIRED SIGNATURE: | e must be specific and cannot be more than five busines |
| CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of file. REQUIRED SIGNATURE: Signature of a. (In accordance with sect constitutes an affirmation I am aware that any false. | e must be specific and cannot be more than five busines ing.) Leading |
| CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of file. REQUIRED SIGNATURE: Signature of a. (In accordance with sect constitutes an affirmation I am aware that any false constitutes a third degree. | e must be specific and cannot be more than five busines ing.) Leading |
| CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of file. REQUIRED SIGNATURE: Signature of a. (In accordance with sect constitutes an affirmation I am aware that any false. | tion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. e information submitted in a document to the Department of State, e felony as provided for in s.817.155, F.S.) |
| CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of file REQUIRED SIGNATURE: Signature of a. (In accordance with sect constitutes an affirmation I am aware that any false constitutes a third degree. | tion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. The following provided for in s.817.155, F.S.) |
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