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J. SAULSBERRY EXAMINER MAY 13 2013

## **COVER LETTER**

£.

TO: Registration Section
Division of Corporations

SUBJECT: DUGAN DISABILITY LAW, 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:			
	D. KEV	IN DUGAN				
			Name of Person			
	DUGAN	N DISABILITY	LAW, LLC			
•			Firm/Company			
	11010	NW 18th Man	or			
		* • • •	Address		. 1 . 5	2013
	Plantat	ion Fl. 33322				3 11 A
		Cit	y/State and Zip Code			=
	DKev	E-mail address: (to be used f	GMAIL.	Com		
		E-mail address: (to be used f	or future annual report notif	fication)	12 gm	75
For fu	rther information	concerning this matter, please	call:			ά
D.	Kevin D	ugan	954 61	2-0672	الآلة بير. حجر: 	35
	Name	of Person	Area Code & Day	time Telephone Number		
Enclo	sed is a check for	or the following amount:				
□\$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee Certified Copy	& \$160.00 Fi Certificate	_	

Mailing Address

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

Street/Courier Address

(additional copy is enclosed)

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

Certified Copy

(additional copy is enclosed)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

DUGAN DISABILITY LAW, LLC.				
	d Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address:				
The mailing address and street address of	the principal office of the Limited Lia	bility Co	mpany	y is:
Principal Office Address:	Mailing Address:			
11010 NW 18th Mnr	11010 NW 18th Mnr			
Plantation FI 33322	Plantation Fl. 33322			
				•
The name and the Florida street address of Inelka Quiros	Name		8 HA OI YAM 610	
11010 NW 18th Mnr	· · · · · · · · · · · · · · · · · · ·		ထ္	`•.
Plantation FI 33322	reet address (P.O. Box <u>NOT</u> acceptable)  FL		35	
C	City, State, and Zip			
Having been named as registered agent as liability company at the place designate registered agent and agree to act in this call statutes relating to the proper and co	ed in this certificate, I hereby accept th	e appoin th the pro I am fam	tment o ovision viliar w	as is of vith

(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:

"MGRM" = Managing Member		
D. Kevin Dugan, MGRM	11010 NW 18th Mnr	
	Plantation FI, 33322	
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		2013 MAY
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		8: 35
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(Use attachment if necessary)		
CLE V: Effective date, if other than	the date of filing: May 13, 2013 (OPTION	IAL)
	ust be specific and cannot be more than five busin	

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.)

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)