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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nar	me)
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Certified Copies	Certificates	s of Status
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Effective Date 6-1-13

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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJE	ест: <u>D</u> е	Name of Limite	DONOVAN 2.	LC
The en	closed Articles of	Organization and fee(s) are s	ubmitted for filing.	
Please	return all correspo	ndence concerning this matte	er to the following:	
	PA-	TRICK DO	NOVAN	
			Name of Person SONOVAN LLC Firm/Company	
	7512	DR PHILLI	PS BLVD ST SO Address	-400 20 BB
			32819 y/State and Zip Code	70 A IX
	PATO	City 12.3 · C	y/State and Zip Code	
•		E-mail address: (to be used f	or future annual report notification)	20 AM 80 TO
For fur	ther information c	oncerning this matter, please	call:	運幣 19
1	ATRICK	DONOVAN	at (407) 908 Area Code & Daytime Telepi	4724
	Name o	i Person	Area Code & Daytime Telep.	none Number
Enclos	sed 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 enclosed)	\$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 Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci	ircle

· Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liab	
ARTICLE II - Address: The mailing address and street address of the p	orincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
75/2 DR PHILLIPS BLVD ST 50-400 ORLANDO FL 32819 ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registeries business entity with an active Florida registration.)	stered Agent. You must designate an individual or another
The name and the Florida street address of the PATRICK D Name 6075 TARAWA Florida street ad	ONOVAN R
ORLANDO	

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" = Manager	Name and Addiess.
"MGRM" = Managing Member	
MRA	PATRICK X- WILL
MGR	TATRICK DONOVAN
	75/2 DR PHILLIPS BLVD STSO-40
	PATRICK DONOVAN 7512 DR PHILLIPS BLVD ST 50-40 ORLANDO FL 32819
•	
MGRM	JULIE DONOVAN 7512 DR PHILLIPS BLYDST 50-4 ORLANDO FL 32819
	7512 NO PHULIDS RIVASTEN-4
	101 1-120 F1 37010
	ORLANDO FL 3281-1

effective date is listed, the date mu	
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