

W14000046119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

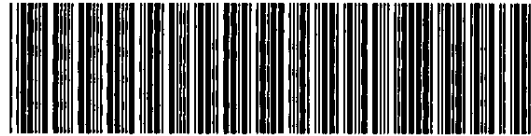
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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14 MAR -3 AM 8:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W14-14591

MAR 20 2014

S. YOUNG

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DCS of 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:

Aaron A. Haak, Esq.  
Name of Person

Knott Ebelini Hart  
Firm/Company

1625 Hendry Street, Suite 301  
Address

Fort Myers, Florida 33901  
City/State and Zip Code

gina@lodgeconstruction.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jasena Pearsey at ( 239 ) 334-2722  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for 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 Circle  
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

# Knott · Ebelini · Hart

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+ Board Certified Business Litigation Lawyer  
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Director of Zoning  
and Land Use Planning

[AHaak@knott-law.com](mailto:AHaak@knott-law.com)

March 14, 2014

## VIA CERTIFIED MAIL RETURN RECEIPT

Sheila H. Young, Regulatory Specialist, II  
Florida Department of State Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Re: Dunn, Cabot L. - Incorporation of DEC Contracting Group, Inc.  
Our File No.: 11029.006

Dear Ms. Young:

In regards to your correspondence dated March 6, 2014, I am aware of the similarity of the names and would like to proceed with the filing. Therefore, I am returning the enclosed documents for processing.

Should you have any questions or concerns, please do not hesitate to contact my office.

Sincerely,

KNOTT·EBELINI·HART

*for Aaron Haak*

Aaron A. Haak, Esq.  
AAH/jp

Encl.

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14 MAR -9 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DCS of Florida, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

6602 Griffin Boulevard  
Fort Myers, Florida 33908

6602 Griffin Boulevard  
Fort Myers, Florida 33908

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

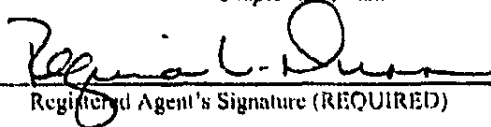
The name and the Florida street address of the registered agent are:

Regina Dunn  
Name

6602 Griffin Boulevard  
Florida street address (P.O. Box **NOT** acceptable)

Fort Myers City FL 33908 Zip

*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 605, F.S..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:  
"AMBR" = Authorized Member  
"MGR" = Manager  
MGR

Name and Address:  
Regina Dunn  
6602 Griffin Boulevard  
Fort Myers, Florida 33908

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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.)

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

*Regina L. Dunn*

Signature of a member or an authorized representative of a member.  
(In accordance with section 605.0203 (1) (b), 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.)

*Regina L. Dunn*

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)

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14 MAR -3 AM 11:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA