## L14000107652

(Requestor's Name)	
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PICK-UP WAIT M	AIL
(Business Entity Name)	<del>,</del>
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
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SECRETARY OF STATE ALL AHASSEE GLOODS

(M) MD 7 18 111.

## COVER LETTER

TO:	Registration Sec Division of Corp			•
SUBJE	CCT: DODANE	FOOLS LLC Name of Lin	nited Liability Company	
The en	closed Articles of (	Organization and fee(s) ar	e submitted for filing.	
Please	return all correspor	ndence concerning this ma	atter to the following:	
	RICHARD D	ODANE	Name of Person	
	DODANE TO	OOLS LLC	Firm/Company	
	10181 WINS	STEAD AVENUE	Address	
	ENGLEWOO	DD, FL 34224	ity/State and Zip Code	
<u>s</u> r	nd0615@hotmail E	.com -mail address: (to be used	I for future annual report notifica	tion)
For fur	ther information co	ncerning this matter, plea	se call:	
Shawi	n Dodane Name o	at (_S		ephone Number
Enclose	ed is a check for th	e following amount:		
<b>☑ \$</b> 125.0	0 Filing Fee	1\$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)
	Registra Division P.O. Bo	Address tion Section of Corporations x 6327 ssee, FL 32314	Street/Courier Addr Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
DODANE TOOLS LLC (Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10181 Winstead Avenue Englewood, FL 34224	10181 Winstead Avenue Englewood, FL 34224
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agent. You must designate an individual or
The name and the Florida street address of the registered a	gent are:
Richard Dodane	
Name	
10181 Winstead Avenue	Marine Marine Anna Anna Anna Anna Anna Anna Anna An
Florida street address (P.O. Box I	NOT acceptable)
Englewood	FL 34224
City	Zip
the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	the appointment as registered agent and agree to act in this fall statutes relating to the proper and complete performance gations of my position as registered agent as provided for in r 605, F.S

(CONTINUED)

Page 1 of 2

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SECRETARY OF STATE

<u> Fitle:</u>	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	
MGR	Richard Dodane
	10181 Winstead Avenue
	Englewood, FL 34224
MGR	Shawn Dodane
	10181 Winstead Avenue
	Englewood, FL 34224
MGR	Christopher Dodane
	10181 Winstead Avenue
	Englewood, FL 34224
Jse attachment if necessary)	
•	
Use attachment if necessary)  V: Effective date, if other than th	ne date of filing:
V: Effective date, if other than the tive date is listed, the date must	ne date of filing:, (OPTIONAL) be specific and cannot be more than five business days prior to or 9
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V: Effective date, if other than the tive date is listed, the date must filing.)  VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of the date must filing.)	f a member or an authorized representative of a member.  tion 605.0203 (1) (b), Florida Statutes, the execution of this document n under the penalties of perjury that the facts stated herein are true.
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Page 2 of 2

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)