## L15 000004774

(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:

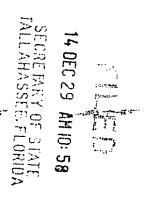
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J. Shivers JAN 0 9 2015



## **COVER LETTER**

TO:	Registration Division of (	Section Corporations			
SUBJE	CCT: <u>Dune F</u>	Partners 1 LLC Name of Lin	mited Liability Comp	any	<del></del>
				<b>-</b>	
The en	closed Articles	of Organization and fee(s) a	re submitted for filing	g.	
Please	return all corre	spondence concerning this m	natter to the following	;;	
	Robert D	)ickhaus			
			Name of Person		
	Dune Re	al Estate Company, LLC			
			Firm/Company		
	1394 Co	unty Highway 283 S, Build	ding 13		
			Address		
	Santa Ro	osa Beach, FL 32459	······································		
			City/State and Zip Coo	de	
_bc	lickhaus@dui	nerec.com E-mail address: (to be use	d for future annual re	port notifica	ntion)
For fur	ther informatio	n concerning this matter, ple	ase call:		
Bohor	t Diekhous	(	050 ) 500 0	220	
Koper	t Dickhaus Nan	ne of Person	850 ) <u>502-8:</u> Area Code		lephone Number
Enclos	ed is a check fo	or the following amount:			
_	0 Filing Fee	☑\$130.00 Filing Fee &	□\$155.00 Filing I	Fee &	□\$160.00 Filing Fee,
<b>- 012</b> 3.0	o i ming i co	Certificate of Status	Certified Copy (additional copy is		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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
, , ,		
Dune Partners 1 LLC		
(Must end with the words "Lim	ited Liability Company, "L.L.C.," or "	LLC.")
ARTICLE II - Address:		
The mailing address and street address of the princip	al office of the Limited Liability Comp	pany is:
Principal Office Address:	Mailing Address:	
1394 County Highway 283 S	1394 County Highway 283 S	3
Santa Rosa Beach, FL 32459	Santa Rosa Beach, FL 3245	
ARTICLE III - Registered Agent, Registered Offi (The Limited Liability Company cannot serve as its of another business entity with an active Florida registr	own Registered Agent. You must desig ation.)	
The name and the Florida street address of the registe	ered agent are:	
Gary Shipman		
N	ame	
60 Clayton Lane		
Florida street address (P.O.	Box NOT acceptable)	
Santa Rosa Beach	FL 32459	
City	Zip	
Yayo_	ccept the appointment as registered age ons of all statutes relating to the proper e obligations of my position as registere hapter 605, F.S	nt and agree to act in this and complete performance
Registered Agent's Si	gnature (REQUIRED)	Ħ
(CONTI	ŕ	14 DEC 29 SEGRETARY ALLAHASSE

<u>Title:</u> "AMBR" = Authorized	Name and Address: Member	
"MGR" = Manager		
Manager	Robert Dickhaus	
	102 Sienna Ct	
	Santa Rosa Beach, FL 32459	
		<del></del>
<del></del>		
	comi)	
(Use attachment if neces  EV: Effective date, if of     ective date is listed, the of filing.)	her than the date of filing: <u>January 1st, 2015</u> . (OPTIONA date must be specific and cannot be more than five business days prior	AL) r to or 90
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E V: Effective date, if of ective date is listed, the of filing.)  E VI: Other provisions, in the experimental series of the expe	Inactive of a member or an authorized representative of a member.  with section 605.0203 (1) (b), Florida Statutes, the execution of this doc affirmation under the penalties of perjury that the facts stated herein are the tany false information submitted in a document to the Department of Sfaird degree felony as provided for in s.817.155, F.S.)  Robert C Dockhall  Typed or printed name of signee	ment rue SEGRETARY

ARTICLE IV-