## L16000059708

(Requ	estor's Name)			
(Address)				
(Addre	ess)			
/ (City/S	State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Busin	ess Entity Na	me)		
(Docu	ment Number	)		
Certified Copies	Certificate	s of Status		
Special Instructions to Fili	ing Officer:			
		:		





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## COVER LETTER

	legistration Section Division of Corporations	· ·			
SHRIFC	Dampier's Armored Roofing LLC	·			
SOPULC	Name of Limited Liability Company				
The enclo	sed Articles of Organization and fee(s)	are submitted for filing.			
Please ret	urn all correspondence concerning this r	natter to the following:			
	Stephanie Dampier				
		Name of Person			
	Dampier's Custom Services Inc				
		Firm/Company			
	24404 77th Road				
		Address			
	O Brien, FL 32071				
		City/State and Zip Code			
	shdampier@gmail.com				
	E-mail address: (to be use	ed for future annual report notification)			
For further	information concerning this matter, plea	se call:			
	Stephanie Dampier	386 288.2292			
	Name of Person	Area Code Daytime Telephone Number			
Enclosed	is a check for the following amount:				
\$125.00 I	Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Address	Street Address			
	New Filing Section Division of Corporations	New Filing Section Division of Corporations			
	P.O. Box 6327	Clifton Building			
	Tallahassee FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Αl	R	Ti	IC.	LE	1 -	N	a	me

The name of the Limited Liability Company is:

Dampier's Armored Roofing LLC

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

## ARTICLE II - Address:

24404 77th Road       24404 77th Road         O Brien, FL 32071       O Brien, FL 32071	Road
O Brien, FL 32071 O Brien, FL :	
	32071

SIGNAR 21 PH 1:39

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

Stephanie H. Damp	Name	
24404 77th Road		
Florida street addre	ess (P.O. Box NOT acc	eptable)
O brien	Florida	32071
City	State	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.

(CONTINUED)

Page 1 of 2

Title: "AMBR" ≠ Authorized Member	Name and Address:
"MGR" = Manager MGR	Daren K. Dampier
	24404 77th Road O Brien, FL 32071
MGR	Joshua D. Walker
	PO Box 43 Branford, FL 32008
(Use attachment if necessary)	
If an effective date is listed, the date must be sp the date of filing.)	e of filing: 3.15.2016 (OPTIONAL) secific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
Signaturada	ember or an authorized representative of a member.
This document is execu I am aware that any fals	ted in accordance with section 605.0203 (1) (b), Florida Statutes.  ie information submitted in a document to the Department of State  the felony as provided for in s.817.155, F.S.
Daren K .Dampi	•

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)