

(Re	questor's Name)	
(Ad	dress)	<u>. </u>
(Ad	dress)	
(Cit	y/State/Zip/Phone) #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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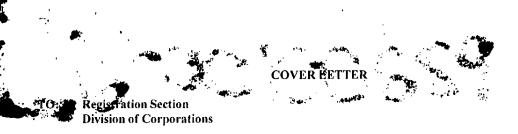
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SUBJECT	Name of Limited Liability Company
The enclos	sed Articles of Organization and fee(s) are submitted for filing.
Please retu	irn all correspondence concerning this matter to the following:
	DAVID L FETTERS
	Name of Person
	D AND J MANAGEMENT COMPANY, LLC.
	Firm/Company
	105 N. COURTENAY PKWY.
	Address
	MERRITT ISLAND, FL. 32953
	City/State and Zip Code COURTENAY105@AOL.COM
	E-mail address: (to be used for future annual report notification)
For further i	information concerning this matter, please call:
	DAVID L FETTERS 321 459-2434 at ()
	Name of Person Area Code Daytime Telephone Number
Enclosed i	s a check for the following amount:
\$125.00 F	Siling Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing 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:		
	COCOA, FLORIDA 329		L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad	dress of the principal offi	ce of the Limited Li	ability Company is:
<u>Principa</u>	Office Address:		Mailing Address:
105 N COURTENAY MERRITT ISLAND,		SAME	
ARTICLE III - Registered Agei (The Limited Liability Company of another business entity with an ac	annot serve as its own Re	egistered Agent. Yo	
The name and the Florida street a	ddress of the registered ag	gent are:	
	JOHN P. TERRERO		
	1	lame	•
	105 N COURTENAY I	PKWY.	
	Florida street address (P.O. Box NOT acce	ptable)
	MERRITT ISLAND	FLORIDA	32953

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.

State

City

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

Page 1 of 2

Martin Ma

Title:	Name and Address:
"AMBR" = Authori	ed Member
"MGR" = Manager	DAVID I PETERDO
AMBR	DAVID L FETTERS 105 N COURTENAY PKWY.
	MERRITT ISLAND, 32953
	MERRITI ISLAMD, 32755
AMBR	JOHN P. TERRERO
	105 N COURTENAY PKWY.
	MERRITT ISLAND, FL. 32953
	· · · · · · · · · · · · · · · · · · ·
	
(Use attachment if n	•
fective date is listed, of filing.) f the date inserted in	f other than the date of filing: MAY 26, 2016 . (OPTIONAL) he date must be specific and cannot be more than five business days prior to or nis block does not meet the applicable statutory filing requirements, this date will not the Department of State's records
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