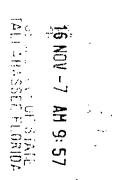
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only

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COVER LETTER

ro:	Registration Section Division of Corporations		
SHB IEA	DUNBAR REALTY SERVICES	L.L.C.	
SUBJEX	Name of	Limited Liabil	ity Company
The encl	osed Articles of Organization and fee(s	a) are submitted	for filing.
Please re	turn all correspondence concerning thi	s matter to the	following:
	LISA DUNBAR		
		Name of	Person
		Firm/Co	mpany
	72 LAKE SUCCESS DRIVE		
	-	Addr	css
	PALM COAST, FLORIDA 32137		
	LDUNBAR123@GMAIL.COM	City/State an	d Zip Code
	E-mail address: (to be u	sed for future a	nnual report notification)
For further	information concerning this matter, pl	ease call:	
	LISA DUNBAR	904	887-8901 Daytime Telephone Number
	Name of Person	Area Code	Daytime Telephone Number
Enclosed	is a check for the following amount:		
\$125.00	Filing Fee S130.00 Filing Fee & Certificate of Status	LCenifi	10 Filing Fee & S160.00 Filing Fee, ed Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassec, 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

DUNBAR REALTY SERVICES, L.L.C. (Must end with the words "Limited Li	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
72 LAKE SUCCESS DRIVE	72 LAKE SUCCESS DRIVE
PALM COAST, FLORIDA 32137	PALM COAST, FLORIDA 32137
ARTICLE III - Registered Agent, Registered Office, & l	

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.

Name

Florida street address (P.O. Box NOT acceptable)

FLORIDA

Zip

State

LISA DUNBAR

PALM COAST

72 LAKE SUCCESS DRIVE

City

Registered Agent's Signature (REOUTRED)

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	LISA DUNBAR
	72 LAKE SUCCESS DRIVE
	PALM COAST, FLORIDA 32137
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary) CLE V: Effective date, if other than the date	of filing: (OPTIONAL)
CLE V: Effective date, if other than the date ffective date is listed, the date must be speed of filing.)	ecific and cannot be more than five business days prior to or 90 da neet the applicable statutory filing requirements, this date will not be
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