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PICK-UP	WAIT	MAIL
(Busine	ss Entity Name)	
(Docum	ent Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filin	g Officer:	

Office Use Only



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DEPARTMENT OF STATE

C. GOLDEN MAR - 6 2017



## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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				Certificate of Fictitious Name		
				Corp Record Search		
				Officer Search		
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			<del></del>	Vehicle Search		
				Driving Record		
Requested by: SETH	03/2017			UCC 1 or 3 File		
Name	Date	Time		UCC 11 Search		
Walk-In	Will Pick Un	1		UCC 11 Retrieval		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:	2017 KAR - 3 PN 3: 53
Dewey's Navarre, LLC	pany, "L.L.C." or "LLC")
(Must contain the words "Limited Liability Comp	oany, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Lin	mited Liability Company is:
Principal Office Address:	Mailing Address:

777 Spring Lake Drive 777 Spring Lake Drive Destin, FL 32541 Destin, FL 32541

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

**Dewey Edward Destin** Name 777 Spring Lake Drive Florida street address (P.O. Box NOT acceptable) Destin Florida 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..

istered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	0
MGR	Dewey Edward Destin
	777 Spring Lake Drive Destin, FL 32541
	Destin, PL 32341
(Use attachment if necessary)	
CLE V: Effective date, if other than the date of filing effective date is listed, the date must be specific an te of filing.)  If the date inserted in this block does not meet the	applicable statutory filing requirements, this date will not be list
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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-