# L17000110894

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M. MOON MAY 1 9 2017

# **COVER LETTER**

	New Filing Section Division of Corporations					
eup we	309 N GEORGIA AVE COCOA FLORIDA 32922					
SUBJEC	SUBJECT: Name of Limited Liability Company					
The enclo	osed Articles of Organization and fee(s) are submitted for filing.					
Please ret	turn 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 FLORIDA 32953					
	City/State and Zip Code COURTENAY105@AOL.COM					
	E-mail address: (to be used for future annual report notification)					
For further	information concerning this matter, please call:					
	DAVID FETTERS 321 459-2434 55					
	Name of Person Area Code Daytime Telephone Number	•				
Enclosed	is a check for the following amount:					
\$125.00	Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	्र <u>्</u> स्				
	Mailing Address Street Address					

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

New Filing Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		ulity Company, "L.	L.C.," or "LLC.")	
RTICLE II - Address he mailing address and	street address of the principal office	e of the Limited Lia	ability Company is:	
]	Principal Office Address:		Mailing Address:	
105 N COU	RTENAY PKWY	SAME		
MERRITT ISLAND FL 32953		<del>-</del>		
MERRITT IS  RTICLE III - Registe The Limited Liability Conother business entity v	red Agent, Registered Office, & Rompany cannot serve as its own Registration.)	gistered Agent. You	Signature: ı must designate an individual or	
MERRITT IS  RTICLE III - Registe The Limited Liability Conother business entity v	red Agent, Registered Office, & Rompany cannot serve as its own Reg	gistered Agent. You	: Signature: 1 must designate an individual or	
MERRITT IS  RTICLE III - Registe The Limited Liability Conother business entity v	red Agent, Registered Office, & Rompany cannot serve as its own Registration.) a street address of the registered age	gistered Agent. You	Signature: I must designate an individual or	
MERRITT IS  RTICLE III - Registe The Limited Liability Conother business entity v	red Agent, Registered Office, & Rompany cannot serve as its own Registration.) a street address of the registered age	gistered Agent. You ent are:	Signature: u must designate an individual or	
MERRITT IS  RTICLE III - Registe The Limited Liability Conother business entity v	red Agent, Registered Office, & Rompany cannot serve as its own Registration.) a street address of the registered age  JOHN P TERRERO No	gistered Agent. You ent are: ame PKWY	u must designate an individual or	
MERRITT IS  RTICLE III - Registe The Limited Liability Conother business entity v	red Agent, Registered Office, & Registered Office, & Registered as its own Registration.)  a street address of the registered age  JOHN P TERRERO  No.  105 N COURTENAY	gistered Agent. You ent are: ame PKWY	u must designate an individual or	

Register Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV.				
	A D	TIC	1 L	11/

'The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	DAVID L FETTERS	_
	105 N COURTENAY PKWY	
	MERRITT ISLAND FL 32953	_
AMBR	JOHN P TERRERO	
	105 N COURTENAY PKWY	<del></del>
	MERRITT ISLAND FL 32953	_
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		<del>-</del> 팔
•		_
(Use attachment if necessary)		77
ADDICE DAY, December 15 allows the standards	CORTIONAL)	
ARTICLE V: Effective date, if other than the dat	te of filing: MAY 30 2017 (OPTIONAL)	DO Jane a Gan
	pecific and cannot be more than five business days prior to or	
the date of filing.)		ςς) An Lo Hotadio
	meet the applicable statutory filing requirements, this date will in	not be listed a
the document's effective date on the Departmen	t of State's records.	
ARTICLE VI: Other provisions, if any.		
ARTICLE VI. Once provisions, if any.		
		<del></del>
REQUIRED SIGNATURE:		
- Inches		
Signature of a n	nember or an authorized representative of a member.	

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.

I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

## DAVID L FETTERS

Typed or printed name of signee

### 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)