## 47000237729

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT N	<b>A</b> AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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## **COVER LETTER**

TO:	New Filing Section Division of Corporations		
	Dowdy Homes LLC		
SUBJE	CT:	of Limited Liability Company	<del>_</del> -
The enc	losed Articles of Organization and fee	(s) are submitted for filing.	
Please r	eturn all correspondence concerning t	nis matter to the following:	
	Michael Dowdy		
		Name of Person	
	·····	r: vo	
		Firm/Company	
	5152 Stratemeyer Drive		
		Address	
	Orlando, Florida 32839		
	E-mail address: (to be	City/State and Zip Code  City/State and Zip Code  used for future annual report notification)	
For further	er information concerning this matter,	•	
	Michael Dowdy	810 623-0507	
	Name of Person	Area Code Daytime Telephone Number	_
Enclose	d is a check for the following amount		
\$125.00	Filing Fee \$130.00 Filing Fee Certificate of State	us Certified Copy Certification (additional copy is enclosed) Certified	Filing Fee, te of Status & Copy 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	y Company is:					
·						
Dowdy Homes LLC				<b>z</b>		
(Must conta	in the words "Limited I	_iability Сотралу, "I	L.C.," or "LLC.")		201	
ARTICLE II - Address:				AX A	2017 NOV	
The mailing address and street ad	dress of the principal of	fice of the Limited L	iability Company is:	TAR IASS	₽	71)
-	•				_	=
Princips	l Office Address:		Mailing Address:	r, o	_	m
5152 Stratemeyer Dri	ve	Same		π''	<b>A</b>	O
Orlando, Florida 3283	39			ORID	5: 44	
					£	
ARTICLE III - Registered Age	nt, Registered Office,	& Registered Agent	s Signature:		_	
(The Limited Liability Company			u must designate an individ	hual or		
another business entity with an a	ctive Florida registration	n, i				
The name and the Florida street a	ddress of the registered	agent are:				
	-	_				
	Michael Dowdy	Name	<del></del>			
		.varne				
	5152 Stratemeyer Dri	ve	<del></del>			
	Florida street address	(P.O. Box <u>NOT</u> acc	eptable)			
	Orlando,	Florida	32839			
	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..

Registered Agent's Signature (REQUIRED

(CONTINUED)

## The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager **AMBR** Michael Dowdy 5152 Stratemeyer Drive Orlando, Florida 32839 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_ . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member 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

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

constitutes a third degree felony as provided for in s.817.155, F.S.

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Michael Dowdy