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SECRETARY OF STATE WIDDLE TALLAHASSEE, FLORIDA

COVER LETTER

TO: New Filing Section

Division of Corporations

SUBJECT: DAVID DEW, LLC.

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MR. DAVID DEW
DAVID DEW, LLC.
1937 B SW Palm City Rd.
Stuart, Florida 34994

daviddew@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID DEW at (772) 521-8968

Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee

\$130.00 Filing Fee & Certificate of Status

\$155.00 Filing Fee & Certified Copy

\$160.00 Filing Fee, Certificate of Status & Certified Copy

(additional copy is enclosed)

(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

ART	ICI	F	l _ l	Na	me

The name of the Limited Liability Company is:

DAVID DEW, LLC.

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

1937 B SW Palm City Rd. Palm City, Florida 34994

1937 B SW Palm City Rd. Palm City, Florida 34994

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:

TRACY WEBER 2201 Marshall Drive Dunedin, Florida 34698 SECRETARY OF STATE

Having been named as registered agent and to accept service of process for the above stated limited hability 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)

FILED

Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager AMBR/MGR DAVID DEW 1937 B SW Palm City Rd. Palm City, FL 34994 AMBR/MGR TRACY WEBER 2201 Marshall Dr. Dunedin, FL 34698 **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. DAVID DEW Typed or printed name of signee

ARTICLE IV- The name and address of each person authorized to manage and control the

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.