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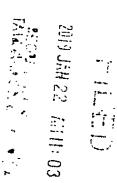
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PICK-UP	☐ WAIT	MAIL
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TO: New Filing Section Division of Corporations	
DONAHUE INDUSTRIES.LLC SUBJECT:	
Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
JAMES DONAHUE	
Name of Person	
DONAHUE INDUSTRIES, LLC	
Firm/Company	
8197 SE 169TH PALOWNIA LOOP	
Address	
THE VILLAGES, FL 32162	
JIM - DONAHUO CO COMCAJ. NO/	•
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
JAMES DONAHUE	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$125.00 Filing Fee S130.00 Filing Fee & S160.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing AddressStreet AddressNew Filing SectionNew Filing Section	

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

Patrick F. Cleary
Attorney at Law
449 Taft Ave
Glen Ellyn, Illinois 60137
(630) 790-6314
(630) 597-2870 Fax
pclearylaw@yahoo.com

January 18, 2019

New Filing Section Division of Corporations PO Box 6327 Tallahassee FL 32314

RE; Donahue Industries LLC

Dear Sir or Madam:

Attached please find original and duplicate original for the above named LLC.

Please accept check for \$155.00 to cover the cost of filing and certified copy.

Please forward certified copy to James Donahue, registered agent 8197 SE Palownia Loop, The Villages, 32162.

Very truly yours.

Patrick F Cleary

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liabil	ity Company is:		
<u>DONAHUE INDU</u>	STRIES, LLC		
(Must cor	ntain the words "Limited Li	ability Con	npuny, "L.L.C.," or "L.LC.")
ARTICLE II - Address: The mailing address and street	address of the principal offi	ice of the L	imited Liability Company is:
<u>Princi</u>	pal Office Address:		Mailing Address:
8197 SE 169TH PA THE VILLAGES, I			8197 SE 169TH PALOWNIA LOOP HE VILLAGES, FL 32162
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	y cannot serve as its own R	egistered A	d Agent's Signature: Agent. You must designate an individual or
The name and the Florida stree	t address of the registered a	gent are:	
	JAMES DONAHUE		
		Name	
	8197 SE 169TH PALC	WNIA LO	OOP
	Florida street address (P.O. Box 🖸	NOT acceptable)
	THE VILLAGES	FL	32162
	City	State	Zip
place designated in this certificat further agree to comply with the j	e, I hereby accept the appoi provisions of all statutes rela phligations of my position as	ntment as reating to the great the state of	for the above stated limited liability company at the egistered agent and agree to act in this capacity. I proper and complete performance of my duties, and I agent as provided for in Chapter 605, F.S Signature (REQUIRED)
		(CONTIN	UED)

<u>l'itie:</u>	Name and Address:
AMBR" = Authorized Member	•
MGR" = Manager JAMES DONAHUE - P	8197 SE 169TH PALOWNIA LOOP
Many DONALION - 1	THE VILLAGES, FL 32162
	·
	te at films (OPTIONAL)
ctive date is listed, the date must be s f filing.)	te of filing:
V: Effective date, if other than the date it ive date is listed, the date must be so filling.) he date inserted in this block does not ment's effective date on the Departmen	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
EV: Effective date, if other than the date clive date is listed, the date must be sof filing.) the date inserted in this block does not ment's effective date on the Department EVI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
V: Effective date, if other than the date tive date is listed, the date must be siffling.) the date inserted in this block does not ent's effective date on the Department. VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
EV: Effective date, if other than the date of the date is listed, the date must be so filling.) The date inserted in this block does not ment's effective date on the Department. EVI: Other provisions, if any. Signature of a fill This document is executed and aware that any fall.	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
V: Effective date, if other than the date tive date is listed, the date must be sifiling.) he date inserted in this block does not ent's effective date on the Departmen. VI: Other provisions, if any. Signature of a first document is executed an aware that any fall.	meet the applicable statutory filing requirements, this date will not tof State's records. member or an authorized representative of a member. uted, in accordance with section 605.0203 (1) (b). Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.

\$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-