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(Requestor's Name)				
(Address)				
(Address)				
	City/State/Zip/Phone #)				
PICK-UP	☐ WAIT ☐ MAIL				
(Business Entity Name)					
	-				
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					
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COVER LETTER

TO: New Filing Section Division of Corporations
Division of Corporations Outdoor
SUBJECT: Dunlavy Solutions LLC Name of Lymited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Derrick Dunlavy Name of Person
- Firm/Company
- Cum Samplemy
7775 Bass Ridge Trail
Tallahassee FL 32312 City/State and Zip Code Drow @ icloud, com E-mail address: (to be used for future annual report notification)
re-man address. (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
☐\$125.00 Filing Fee Certificate of Status ☐\$155.00 Filing Fee Certified Copy Certificate of Status Certified Copy (additional copy is enclosed) ☐\$160.00 Filing Fee Certified Copy (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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

\sim \sim \sim	149001	
Dunlary Sol	utions	LLC.
 (Must conatin the words "Limited I		

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

Principal Office Address:	Mailing Address:		
7775 Bass Ridge Trail	7775 Bass Ridge Trail		
ARTICLE III - Registered Agent, Registered Office, & Regist	dered 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:

Derrick Dunlary

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.,

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Derrick Dunlar	y
	7775 Bass	Rose For
		3 <u>.3</u>
		
		
		
		——
RTICLE V: Effective date, if other than the dat f an effective date is listed, the date must be specified to the date of the d		
ne date of filing.)		
Sote: If the date inserted in this block does not		irements, this date will not be listed a
he document's effective date on the Departmen	Fof State's records.	产资 19
RTICLE VI: Other provisions, if any.		
		
		<u> </u>
REQUIRED SIGNATURE:		<u>e</u> : -
		승규 ㅇ
Signature of a m	ember or an authori <mark>zett repre</mark> sentativ	e of a member.
	uted in accordance with section 605,0203	
	se information submitted in a document to	
constitutes a third degree	ee felony as provided for in s.817.155, F.	.S.
\mathcal{D}_{α}	sick Dualand	
_ <u>_\</u>	Typed or printed name of signee	
	Types of printes name of signer	

<u>Filing Fees:</u> \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)