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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Bu	isiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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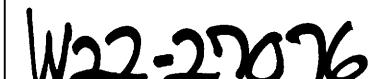
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2022 MAR 14 PM 4: 44

SECRETARY OF STATE
FALLAHASSEE, FLORIOA

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D. O'KEEFE MAR 2 1 2022





March 3, 2022

DANIEL ADAMS 15 LAKE ELOISE LANE WINTER HAVEN, FL 33884

SUBJECT: DA3B UNLIMITED LLC Ref. Number: W22000027076

We have received your document for DA3B UNLIMITED LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The correct forms are enclosed. Please complete and return. No further payment is needed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL LO'KEEFE Regulatory Specialist II

Letter Number: 622A00005182

www.sunbiz.org

COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: DA3B Unlimited LLC	
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:	
Daniel J Adams	
Name of Person	
Firm/Company	
15 Lake Eloise Lane	
15 Lake Eloise Lane Address	
Winter Haven, Fl 33884 City/State and Zip Code Addms 3 D msn. com	
City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
Daniel Adams at (863) 559 - 2823 Name of Person Area Code Daytime Telephone Number	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	ı
- / / / / / / / / / / / / / / / / / / /	ead ail b
Mailing Address New Filing Section Street Address New Filing Section Division	
Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	vanic.	
The name of the	Limited Liability Company is:	

The name of the Limited Liability Company is:

DA3B Unlimited 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:

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:

Daniel J Adams

Name

15 Lake Eleise Lane

Florida street address (P.O. Box NOT acceptable) Winder Haven Fl 33884

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)

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager A M B R	Christopher D Adams 6803 Lunar Hane -> 6803 Lune Orlando, Fl 30801 Lane
AM BR	Carter J Aciams 308 Ruby Lake Loop Winter Howkn, Fl 33884
AM BR	Nathaniel W. Adams 3006 Plantation Road Winter Haven, Fl 33889
(Use attachment it necessary)	
(If an effective date is listed, the date must be sp the date of filing.)	e of filing:
ARTICLE VI: Other provisions, if any.	
<u>REOUIRED</u> SIGNATURE:	Mr Hallan
This document is executed an aware that any false	nember 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 ce felony as provided for in s.817.155, F.S.
	sid T Adams

Filing Fees:

Typed or printed name of signee

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE