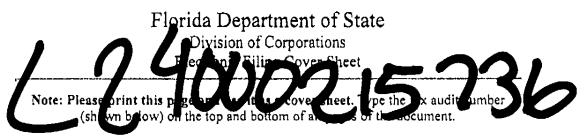
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Division of Corporations



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Division of Corporations

Fax Number : (850)617-6381

Account Name : HENDEE MCKERNAN SCHROEDER WILKERSON & HENDEE PA

Account Number : I19980000066 : (813)258-1177 : (813)259-1106 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ____ibeattle@hendeelaw.com_

FLORIDA LIMITED LIABILITY CO.

DJG Leasing III, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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Help

(((H24000173779 3)))

ARTICLES OF ORGANIZATION OF

DJG LEASING III, LLC

ARTICLE I-Name

The name of the limited liability company shall be DJG Leasing III, LLC.

ARTICLE II-Address

The street address and the mailing address of the principal office of the limited liability company is:

Street address:

Mailing Address:

100 N. Washington Blvd.

100 N. Washington Blvd.

Suite 201

Suite 201

Sarasota, Florida 34236

Sarasota, Florida 34236

ARTICLE III-Registered Agent

The name and the Florida street address for the registered agent of the limited liability company is:

Hendee, McKernan, Schroeder, Wilkerson & Hendee, P.A. 1700 South MacDill Avenue, Suite 200 Tampa, Florida 33629

ARTICLE IV-Management

The name and address of each person authorized to manage and control the limited liability company is:

David Grain 100 N. Washington Blvd., Suite 201 Sarasota, Florida 34236

IN WITNESS WHEREOF, I have sig	aned the	se Articles	of Organization	and acknowledged
them to be my act this 14 th day of May, 2024.	Λ	•		~

Signature of Member or authorized representative of a member

In accordance with Section 605.0205(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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SECRETARY OF STATE DIVISION TO MAKE OF STATE (((H24000173779 3)))

REGISTERED AGENT

ACCEPTANCE OF DESIGNATION

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, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the duties, and the undersigned is familiar with and accepts the obligations of the position as registered agent as provided for in Chapter 605, Florida Statutes.

REGISTERED AGENT:

Hendee, McKeman, Schroeder, Wilkerson & Hendee, P.A.

Name: Lisa H. Wilkerson Title: Vice President

1700 South MacDill Avenue

Suite 200

Tampa, Florida 33629