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TO:	Registration S Division of Co						
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SUBJE	CI:		ed Liability Compa				
The end	closed Articles of	f Organization and fee(s) are s	submitted for filing	<u>;</u> .			
Please	return all corresp	ondence concerning this matte	er to the following	:			
		Marta	a L. Este	vez			
•			Name of Person		······································		, -
		Dalou D	esign St	udio LL	C.		
•			Firm/Company			-	
		1212 Salt (Creek Isl	and Dri	ve	72 >	201
•			Address			7.	
		Ponte Vedra	Beach ,F	Florida (32082	24 1521	3SEP 26
,			y/State and Zip Code		_	- 17 J	
_			32082@a			-:	
		E-mail address: (to be used f	•	ort notification)			3 : 27
For fur	ther information	concerning this matter, please					_
	Marta I	Estevez		¸540-30			
	Name	of Person	Area Code	e & Daytime Telep	ohone Number	,	
Enclos	sed is a check fo	or the following amount:					
□\$ 125.	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	S155.00 Filir Certified Co (additional cop	ру	\$160.00 F Certificate Certified (additional)	e of Stat Copy	tus &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton E 2661 Exc	fourier Address tion Section of Corporations Building ecutive Center Cosee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limit	ed Liability Company is:			
	Dalou Design Studio LLC.			
(Must en	d with the words "Limited Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Addre	ss:			
The mailing address an	d street address of the principal office of the Limited L	iability Co	mpan	y is:
Principal Office Addr	ress: Mailing Address:			
1212 Salt Creek Island D	Drive 1212 Salt Creek Island Drive			
ARTICLE III - Regis The Limited Liability Compar business entity with an active	tered Agent, Registered Office, & Registered Agent ny cannot serve as its own Registered Agent. You must designate an indi	's Signatu	her	
The Limited Liability Compar business entity with an active	tered Agent, Registered Office, & Registered Agent ny cannot serve as its own Registered Agent. You must designate an indi	's Signatu vidual or anot	her	P
The Limited Liability Compar business entity with an active	tered Agent, Registered Office, & Registered Agent ny cannot serve as its own Registered Agent. You must designate an indicate Florida registration.)	vidual or anot	her 201 3 SEP 2	r -
The Limited Liability Compar business entity with an active	tered Agent, Registered Office, & Registered Agent ny cannot serve as its own Registered Agent. You must designate an indi Florida registration.) ida street address of the registered agent are:	vidual or anot	her 201 3 SEP 26	£
The Limited Liability Compar business entity with an active	tered Agent, Registered Office, & Registered Agent ny cannot serve as its own Registered Agent. You must designate an indi Florida registration.) ida street address of the registered agent are: Marta L. Estevez	vidual or anot	her 2018 SEP 26 AH	*
The Limited Liability Compar business entity with an active	tered Agent, Registered Office, & Registered Agent ny cannot serve as its own Registered Agent. You must designate an indi Florida registration.) ida street address of the registered agent are: Marta L. Estevez Name	vidual or anot	her 2018 SEP 26 AM 9:	
The Limited Liability Compar business entity with an active	tered Agent, Registered Office, & Registered Agent ny cannot serve as its own Registered Agent. You must designate an indi Florida registration.) ida street address of the registered agent are: Marta L. Estevez Name 1212 Salt Creek Island Drive	vidual or anot	her 2018 SEP 26 AH	F

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 608, F.S..

egistered Agent's Signature (REQUIRED

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	Marta L. Estevez
	1212 Salt Creek Island Drive
	Ponte Vedra Beach, Florida 32082
	- And the second
	
	And the second s
(Use attachment if necessary)	
•	
	e date of filing: (OPTIONAL)
	st be specific and cannot be more than five business days
o or 90 days after the date of filing.)	
REQUIRED SIGNATURE:	
side and sid	1100
///www	
Signature of a memb	er or an authorized representative of a member.
	8.408(3), Florida Statutes, the execution of this document
constitutes an affirmation under	er the penalties of perjury that the facts stated herein are true.
	ny as provided for in s.817/155, F.S.)
	Marta L. Estevez
	wheel or printed name of signee
•	yped or printed name of signee
Filing Fees:	7

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

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