

123000300779

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

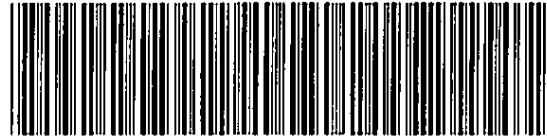
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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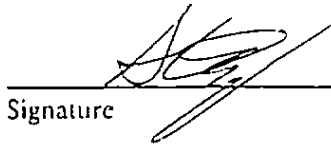
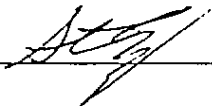
CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

DUXCM LLC

Please Debit FCA000000003 For: 125

Thank you Seth Neeley



Signature

Requested by: SETH 06/22/2023

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

ARTICLES OF ORGANIZATION
FOR
DUXCM LLC

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **DUXCM LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office of the company is:

**2561 NE 19 ST
POMPANO BEACH FL 33062**

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ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Bauer Gutierrez & Borbon PLLC, 814 Ponce de Leon Blvd, Suite 210, Coral Gables, FL 33134**

ARTICLE IV: AUTHORIZED MEMBER AND OR MANAGER

The name and address of each initial person authorized to manage and control the Limited Liability Company maybe made part of public record at a later date.

**MANAGER: MOHAMED GUIZANI
2561 NE 19 ST
POMPANO BEACH FL 33062**

The undersigned has executed these Articles of Organization for filing purposes this 15th day of June 2023.

/S/ Mohamed Guizani, as Authorized Representative of DUXCM LLC

Authorized Representative

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CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of the Florida Statutes, the mentioned company, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the company is: **DUXCM LLC**
2. The name and street address of the registered agent and office is:

Bauer Gutierrez & Borbon PLLC
814 Ponce de Leon Blvd, Suite 210
Coral Gables, FL 33134

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.

/S/ Jason S. Ross

Jason S. Ross for Bauer Gutierrez & Borbon PLLC

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