

LIWOOD128239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

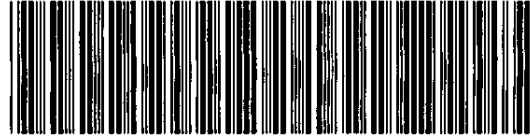
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



000287433670

07/01/16--01020--006 \*\*125.00

FILED  
16 JUL - 1 AM 9:01  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Dongal Investments, 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:

Galit Mazor

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Firm/Company

6220 SW 56 Street

\_\_\_\_\_  
Address

Davie, FL 33314

\_\_\_\_\_  
City/State and Zip Code

donngal@aol.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Galit Mazor

305

788-1809

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:



\$125.00 Filing Fee



\$130.00 Filing Fee &  
Certificate of Status



\$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)



\$160.00 Filing Fee;  
Certificate of Status &  
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 of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## **ARTICLES OF ORGANIZATION**

### **OF**

## **DONGAL INVESTMENTS, LLC**

The undersigned hereby executes these Articles of Organization for the purpose of organizing a limited liability company under the laws of the State of Florida.

### **ARTICLE I**

The name of the limited liability company is Dongal Investments, LLC.

### **ARTICLE II**

The mailing address of the limited liability company shall be 6220 SW 56 Street, Davie, FL 33314, and its street address is the same.

### **ARTICLE III**

The business purpose of the limited liability company is to engage in any lawful act or activity which may be carried on by limited liability companies in the State of Florida and, in connection therewith, the limited liability companies conferred by the limited liability company laws of the State of Florida.

### **ARTICLE IV**

The address of the initial registered office of this limited liability company in Florida shall be 6220 SW 56 Street, Davie, FL 33314, and its initial registered agent at that address shall be Galit Mazor.

### **ARTICLE V**

The limited liability company shall have perpetual existence.

## ARTICLE VI

The name and address of authorized representative of the limited liability company as set forth in the operating agreement is as follows:

Galit Mazor  
6220 SW 56 Street  
Davie, FL 33314

## Article VII

The limited liability company reserves the right to amend, alter, change or repeal any provisions contained herein in the manner now or hereafter prescribed by law, and all rights conferred on members herein are granted subject to this reservation.

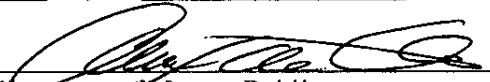
IN WITNESS WHEREOF, the undersigned subscribing member or authorized representative of the limited liability company, have hereunto set their hand for the purpose of organizing this limited liability company under the laws of the State of Florida, and we hereby make, subscribe, acknowledge and file in the office of the Secretary of State of the State of Florida the Articles of Organization and certify that the facts herein stated are true, all on this 30 day of June, 2016.

  
Galit Mazor

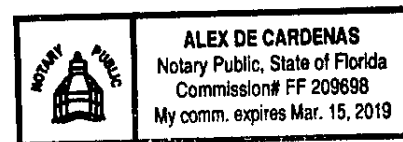
STATE OF FLORIDA  
COUNTY OF BROWARD

BEFORE ME, personally appeared Galit Mazor, who produced identification (Type: Florida Drivers License) and who executed the foregoing Articles of Organization as a voluntary act and deed as the authorized representative of said limited liability company, and that the facts set forth therein are true and correct.

WITNESS my hand and official seal on this 30 day of June, 2016.

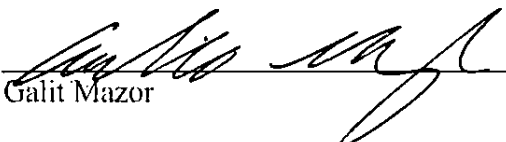
  
Signature of Notary Public:  
Notary Public, State and County aforesaid  
My commission expires: 3/15/2019

(Notarial Seal)



#### ACCEPTANCE BY REGISTERED AGENT

Having been named to accept service of process for Dongal Investments, LLC, a Florida limited liability company, I hereby accept such appointment and agree to act in this capacity, and agree to comply with the provisions of law relating to keeping said office open. I further acknowledge that I am familiar with, and accept, the obligations imposed upon registered agents of limited liability companies.

  
Galit Mazor