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To:
Division of Corporations
Fax Number : (850)205-0383

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

LIMITED LIABILITY COMPANY

D & O BUSINESS & SERVICES LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is:

D & O BUSINESS & SERVICES LLC.

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

**10738 N W 70 Lane
MIAMI, FLORIDA 33178**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, &
REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

Name: OLGA MARIA GONZALEZ MEJIA

Florida Street Address: 10738 N.W. 70 Lane

City, State and Zip Code: MIAMI, FLORIDA 33178

Telephone Number: (305) 470-9893

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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.



Registered Agent's Signature

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ARTICLE IV - MANAGEMENT (Check box of applicable)

The Limited Liability Company is to be managed by one manager or more manager and is therefore, a manager- managed-company are:

DILCIA EVELYN SOLIVAN
PRESIDENT
10738 N W 70 Lane
MIAMI, FLORIDA 33178

OLGA MARIA GONZALEZ MEJIA
VICE-PRESIDENT
10738 N W 70 Lane
MIAMI, FLORIDA 33178



Signature of a members or an authorized representative of a member

(In accordance with section 608 408 (3) Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of sections 608.415 or 608.507, Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a Registered office and Registered Agent, in the State of Florida.

1. The name of the Limited Liability Company is:

D & O BUSINESS & SERVICES LLC.

2. The name and address of the registered agent and office is:

OLGA MARIA GONZALEZ MEJIA

Name

10738 N W 70 Lane

Address

Miami, Florida 33178

(CITY/STATE/ZIP CODE)

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TALLAHASSEE, FLORIDA
01 DEC 26

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 AGREED 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.



Signature, OLGA MARIA GONZALEZ MEJIA

DECEMBER 21, 2001