## L03000048593

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LAZARUS CORPORATE FILI 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973	NG SERVICE	03 DEC -1 PH 2: 23
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CORPORATION NAME(S) & D 1. DIMPEX L, L, (Corporation Name) 2. (Corporation Name) 3. (Corporation Name) 4. (Corporation Name)	(Document #) (Document #) (Document #) (Document #)	، 
NEW FILINGS	AMENDMENTS	
Profit	Amendment	
NonProfit	Resignation of R.A., Officer/Director	
Limited Liability	Change of Registered Agent	
Domestication	Dissolution/Withdrawal	
Other	Merger	· · ·
OTHER FILNGS Annual Report Fictitious Name Name Reservation	REGISTRATION/ QUALIFICATION Foreign Limited Partnership Reinstatement	
	Trademark	

Other

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Examiner's Initials

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**ARTICLE I - Name:** The name of the Limited Liability Company is:

DIMPEX L.L.C.

## ARTICLE II - Address:

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

4855 SW 93 CT MIAMI, FLORIDA 3310 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Shan The name and the Florida street address of the registered agent are: LOURDES C. LL 4855 5W 93 CT Florida street address (PA) Rev. NOT acceptable) Minali. FLORIDA 33165 City, State, and Zip

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

Article IV - Management (Check box if applicable.) X The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

ARTICLEV: EFFECTIVE DATE EFFECTIVE DATE is: JAN 137, 2004 Lourdes C. Luis 4855 Sw. 93cr, Miami, FE 33165- MANAGER (An additional article must be added if an effective date is requested) Signature of a member 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, ) Lourdy C. Lais Typed or printed name of signee

FILING FEES: \$ 100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.09 Certified Copy (OPTIONAL) 5.00 Certificate of Status (OPTIONAL)