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SECRETARY OF STATE

TRANSMITTAL LETTER

Division of	Section Corporations				
SUBJECT: D.R.D.		ited Liability Co	ompany)		
The enclosed Article	s of Organization and fee(s) ar	e submitted for t	ĩling.		
	Please return all correspond	dence concernin	g this matter to the foll	owing:	
MA	RLON DAVID RUBIO				
		(Name of Person	1)		
D.R DI	ESIGN LLC				
		(Firm/Company)		
16325 GOL	CLUB RD. # 308				
		(Address)		a .	
WE	STON - FL. 33326			2004 MAY 12 SECRETARY	7
	(C	ity/State and Zip (Code)	E E	- 0
For further information	on concerning this matter, plea	se call:		12 P ARY OF S	m
MARLON DAVID F	UBIO	at (_786	443 7610	SE =	
(Na	me of Person)	(Area C	ode & Daytime Telephor	ne Number) &	

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

D.R DESIGN LLC					
ARTICLE II - Address: The mailing address and street address of	of the principal offi	ce of the Li	mited Liał	oility C	ompany
Principal Office Address:	<u>N</u>	Iailing Add	ress:		
16325 GOLF CLUB RD. #308		026 GLADES	CIRCLE		
WESTON - FL.	S	JITE 400 PM	B 210		
33326		ESTON - FL	33327		
ARTICLE III - Registered Agent, Rep The name and the Florida street address MARLON DAVID RUE	310	Registered gent are:	RY OF S	12 P	
	Name			l: 28	
16325 GOLF CLUB R			<u>.</u>	rd, t	
Florida street add	dress (P.O. Box <u>NOT</u>)	acceptable)			
WESTON	FLORI	DA 33326			_
***************************************					_

Having compa 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, Florida Statutes...

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGR	MARLON DAVID RUBIO		
<u></u>	16325 GOLF CLUB RD. # 308	_	
	WESTON - FL. 33326	_	- v
	in <u>organizacija kao kao mjera iza iza iza iza iza iza iza iza iza iz</u>		
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	TAS 2	- ·	
(Use attachment if necessary)	HAY 12 P 1		
NOTE: An additional article must	be added if an effective date is requested.		
REQUIRED SIGNATURE:	FL ID		معي ير
Signature of a member or a	authorized representative of a member.	,	•
(In accordance with section 6 of this document constitutes a that the facts stated herein are	08.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury e true.)		
MARLON DAVID RUBIO	militad name of riceso		a 3
i ypeu or	printed name of signee		

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

51,0104 Carolon Kushna

