

L05000024818

Division of Corporations

https://efile.sunbiz.org/scripts/efilcovr.exe

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H05000061901 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : 120010000247
Phone : (800)494-3124
Fax Number : (305)675-2811

LIMITED LIABILITY COMPANY

Da Tribe, LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 023 |
| Estimated Charge | \$125.00 |

| | |
|-------------------|-----|
| Name Availability | |
| Document Examiner | DCC |
| Updater | DCC |
| Updater Verifier | DCC |
| Acknowledgement | DCC |
| W. P. Verifier | DCC |

Electronic Filing Menu

Corporate Filing

Public Access Help

2005 MAR 11 A 10:57
SECRETARY OF STATE
ALLA S. SSEE, FLORIDA

FILED

RECEIVED
05 MAR 11 PM 4:02
DIVISION OF CORPORATION

H0500000619013

**ARTICLES OF ORGANIZATION FOR A FLORIDA
LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:
Da Tribe, LLC

ARTICLE II ADDRESS

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

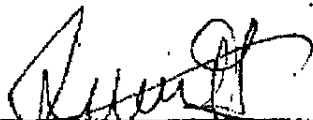
293 Cavalier St.
Palm Bay, Florida 32909.

**ARTICLE III REGISTERED AGENT, REGISTERED
OFFICE & REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent
is;

A1A Registered Agent Inc.
92 Sadberry Rd.
Quincy, Fl. 32351

Having been named as registered agent 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 all statutes
relating to the proper and complete performance of my duties, and I am
familiar with accept the obligations of my position as registered agent as
provided for in Chapter 608, F.S..



Registered Agent's Signature

2005 MAR 11 A 10:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

H0500000619013

H050000619013

Page 2 Da Tribe, LLC

ARTICLE IV

The Limited Liability Company will be managed by one or more managing members.

ARTICLE V

The name and address of the managing members of the LLC are:

Managing Member:

Kevon O'Brien

293 Cavalier St.

Palm Bay Florida 32909

Managing Member:

Lorenzo Ventura

293 Cavalier St.

Palm Bay Florida 32909



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.

Kevon O'Brien

2005 MAR 11 A 10:51
SECRETARY OF STATE
ALLAHACSEE, FLORIDA

FILED

H050000619013