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PICK-UP	WAIT MAIL
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(Bu	isiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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Office Use Only



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SECRETARY OF STATE 06 FEB - 6 PN 3: 02
TALLAHASSEE, FLORID/06 FEB - 6 PN 3: 02

CAPITAL CONNECTION, INC. 417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222 DH+SR LLC Art of Inc. File_ LTD Partnership File_ Foreign Corp. File_ L.C. File____ Fictitious Name File_____ Trade/Service Mark_____ Merger File____ Art. of Amend. File_____ RA Resignation____ Dissolution / Withdrawal___ Annual Report / Reinstatement_____ Cert. Copy____ Photo Copy___ Certificate of Good Standing Certificate of Status_____ Certificate of Fictitious Name____ Corp Record Search_____ Officer Search_____ Fictitious Search____ Fictitious Owner Search Signature Vehicle Search____ Driving Record_____ UCC 1 or 3 File_____ Requested by:

Name

Walk-In

Date

Will Pick Up

Time

UCC 11 Search____

UCC 11 Retrieval____

Courier

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
DH&SR LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
10813 Denver Drive Cooper Cidy, Florida 330x6 75. 5.
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Heddy Muransky, P.A.
Florida street address (P.O. Box NOT acceptable)
Cooper 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

(CONTINUED)

Page 1 of 2

<u>l'itle:</u> 'MGR" = Manager 'MGRM" = Managing Member	Name and Address:
Mgs	Heddy Muransky 10813 Denver Oriver Cooper Ciru, FI 3300
<u> </u>	
Use attachment if necessary)	
NOTE: An additional article	must be added if an effective date is requested.
REQUIRED SIGNATURE:	
~/	
- /	nember of an authorized representative of a member.
(In accordance v of this documen	nember of an authorized representative of a member. with section 608.408(3), Florida Statutes, the execution r constitutes an affirmation under the penalties of perjury mated herein are true.)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)