

W06000067769

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

From: Account Name : A 1 A CORPORATE SERVICES, INC.
Account Number : I20010000247
Phone : (800) 494-3124
Fax Number : (305) 675-2811

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DIVISION OF CORPORATION

FLORIDA/FOREIGN LIMITED LIABILITY CO
DBG, LTD. CO.

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**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:

DBG, LTD. CO.

ARTICLE II ADDRESS

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

309 WILD OLIVE LANE
LONGWOOD, FL 32779

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

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

CHRIS PIEKARSKI
309 WILD OLIVE LANE
LONGWOOD, FLORIDA 32779

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..



CHRIS PIEKARSKI / Registered Agent's Signature

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a Manager Managed Company.

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ARTICLE V

The name(s), address(es), and title(s) of the MANAGER(S):

CHRIS J PIEKARSKI
MANAGER: 309 WILD OLIVE LANE
LONGWOOD, FLORIDA 32779

CATHY B. PIEKARSKI
MANAGER: 309 WILD OLIVE LANE
LONGWOOD, FLORIDA 32779.

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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.)

CHRIS J PIEKARSKI
Typed or printed name of signee

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