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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
AND ASSESSED TO STATE

## **LAZARUS**

CORPORATE FILING SERVICE 3320 SW 87<sup>TH</sup> AVENUE MIAMI, FL 33165 305-552-5973

· · · ·	FSE SE
CORPORATION NAME(S) & DOCUMI	Office Use Only ENT NUMBER(S), (if known):
1. DAN, LLC (Corporation Name)	(Document#)
2. (Corporation Name)	(Document #)
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
Walk in Pick up time  Mail out Will wait	Certified Copy  Photocopy  Certificate of Status
NEW FILINGS  Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS  Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS  Annual Report Fictitious Name	REGISTRATION/QUALIFICATION  Foreign Limited Partnership Reinstatement Trademark Other

Examiner's Initials

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR	FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name:	E E
The name of the Limited Liability Company	y is:
DAN, LLC	EEQ. 72
(Must end with the words "Limited Liability Company, "L	Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	REFERENCE
	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6725 Kingsmoor Way	6725 Kingsmoor Way
Miami Lakes, FL 33014	Miami Lakes, FL 33014
	Registered Agent's Signature: Registered Agent. You must designate an individual or another the registered agent are:
Carlos de la Osa	
N <sub>i</sub>	ame
267 Minorca Avenue	e #200
	et address (P.O. Box <u>NOT</u> acceptable)
Coral Gables	FL
City, St.	ate, and Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet	It to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all be performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S
Registered Agent's Si	ignature (REQUIRED)

(CONTINUED) Page 1 of 2

## 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" = Ma "MGRM" = N	nager Ianaging Member	Name and Address:	
MGR	<del></del>	Maylein Rodriguez 6725 Kingsmoor Way Miami Lakes, FL 33014	
MGRM		Rolando Rodriguez 6725 Kingsmoor Way Miami Lakes, FL 33014	
	<u> </u>		
(1)			
ARTICLE V: Effecti	listed, the date must be	date of filing: (C specific and cannot be more than five bus	OPTIONAL) siness days prior
REQUIRED	SIGNATURE:  Signature of a member	or an authorized representative of a member.	
	of this document constit that the facts stated he	ion 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury trein are true.)  Source Playare 2  ed or printed name of signee	

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)