

L06000093825

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.

((H06000235651 3))



H060002356513ABC

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 : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
 Account Number : 075350000353
 Phone : (212) 431-5000
 Fax Number : (212) 431-1441

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 SEP 25 AM 8:49

FILED

RECEIVED
06 SEP 25 AM 10:24
DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Dieu du Rock LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

*9-26
MST*

Electronic Filing Menu

Corporate Filing Menu

Help

H06000235651 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Dieu du Rock LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4670 Links Village Drive, Suite C-203
Ponce Inlet, Florida 32127

4670 Links Village Drive, Suite C-203
Ponce Inlet, Florida 32127

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Richard Vall

Name

4670 Links Village Drive, Suite C-203

Florida street address (P.O. Box **NOT** acceptable)

Ponce Inlet, Florida 32127 FL

City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 SEP 25 AM 8:49

FILED

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

H06000235651 3

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

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

Title:
"MGR" = Manager
"MGRM" = Managing Member

Name and Address:

MGRM

Richard Vail
4670 Links Village Drive, Suite C-203
Ponce Inlet, Florida 32127

(Use attachment if necessary)

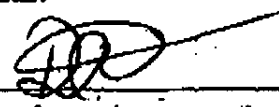
ARTICLE V: Effective date, if other than the date of filing: Upon filing (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 SEP 25 AM 8:49

FILED

REQUIRED SIGNATURE:



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.)

Richard Vail
Typed 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)