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(Re	equestor's Name)
(Ac	ddress)
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PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer
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LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552	-5973	
		Office Use Only
CORPORATION NAME(S) & DOCI	UMENT NUMBER(S), (if I	known):
1. D. O. C.F. Q. HANDY	WORK, L.L.C.	
(Corporation Name)	(Document #)	STEEL STEEL
2. (Corporation Name)	(Document #)	08 08
3(Corporation Name)	(Document #)	*
4.	, ,	
(Corporation Name)	(Document #)	-
Walk in Pick up time	2.06	Certified Copy
Mail out Will wait	Photocopy	Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>	
Profit Not for Profit	Amendment Resignation of R	A., Officer/Director
Limited Liability Domestication	Change of Register Dissolution/Without	ered Agent
Other	Merger	
OTHER FILINGS	REGISTRATION/Q	<u>UALIFICATION</u>
Annual Report Fictitious Name	Foreign Limited Partnersh Reinstatement	nip :
·	Trademark Other	
•		Examiner's Initials

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF D.O.C.F.Q. HANDYWORK, L.L.C.

ARTICLE I - Name

The name of the Limited Liability Company is: **D.O.C.F.Q. HANDYWORK, L.L.C.**

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is: 6416 S.W. 15 STREET, MIAMI, FLORIDA 33144

ARTICLE III - Duration

The period of duration for the Limited Liability Company shall be: PERPETUAL.

ARTICLE IV - Management

The Limited Liability Company is to be managed by the member(s) and the name and address of the managing member(s) (are) (is): ORLANDO CICILIA, 6416 S.W. 15 STREET. MIAMI, FLORIDA 33144.

The undersigned member or authorized representative of a member of: **D.O.C.F.Q. HANDYWORK, L.L.C. disposes and says:**

- 1) the above named limited liability company hast at least one member.
- 2) the total amount o cash contributed by the member(s) is \$1,000.00.

- 3) if any, the agreed value of property other than cash contributed by member(s) is \$0. A description of the property is attached and made a part hereto.
- 4) the total amount of cash or property anticipated to be contributed by member(s) is \$50,000.00. This total includes amounts from 2 and 3 above.

NAME ORLANDO CICILIA

DATE

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT OF DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is : D.O.C.F.Q. HANDYWORK, L.E.C.
- 2. The name and address of the registered agent and office is: ORLANDO CICHA A

6416 S.W. 15 Street Miami, Florida 33144

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.

NAME

ORLANDO CICILIA

DATA