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(Requestor's Name)					
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PICK-UP	☐ WAIT	MAIL			
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COVER LETTER

TO: Registration Se Division of Co			
SUBJECT: D.B. D	Orafting Services, L	LC d Liability Company)	
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
Danilo F.	Benavides		
	(1	Name of Person)	
D.B. Draft	ting Services, LL0		
	(Firm/Company)	
1603 Oa	k Hallow Rd.		
		(Address)	
Clermon	t, FL 34711		
	(City,	/State and Zip Code)	
For further information	concerning this matter, please	call:	
Victor Lozano		at (703) 335165	59-Ext 142
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for	or the following amount:		
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	✓ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center	ns · Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
D.B. Drafting Services, LLC (Must end with the words "Limited Liability Company, "Limited Liability Company," Limited Liability Company," Limited Liability Company, "Limited Liability Company, "Limited Liability Company, "Limited Liability Company, "Liability Company, "Liability Company, "Liability Company, "	Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Danilo F. Benavides	1603 Oak Hallow Rd. Clermont, FL 34711
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration panilo F. Benavides Name 1603 Oak Hallow Rd.	ered Agent. You must designate an individual or another
	ress (P.O. Box NOT acceptable)
Clermont City, State, a	FL 34/11
Having been named as registered agent and to a liability company at the place designated in th registered agent and agree to act in this capacity statutes relating to the proper and complete per	na Zip accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all afformance of my duties, and I am familiar with and

IIaccept 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

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" = Manager "MGRM" = Managing Member	Name and Address:	
	MGRM	Danilo F. Benavides 1603 Oak Hallow Rd. Clermont, FL 34711	<u>. </u>
	(Use attachment if necessary)		
(If an	CLE V: Effective date, if other than the dat effective date is listed, the date must be sp days after the date of filing.)	e of filing: (pecific and cannot be more than five bu	OPTIONAL) usiness days prior
	REQUIRED SIGNATURE:		O7 MAY SECKEL TALLAHI
	(In accordance with section of this document constitute that the facts stated herei Danilo F. Benavides		TILED 21 PH 2: 36 AKI OF STATE ASSEE, FLORIDA
	Signature of a member or (In accordance with section of this document constitute that the facts stated herei Danilo F. Benavides	n 608.408(3), Florida Statutes, the execution is an affirmation under the penalties of perjury	PH 2:

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)