

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.

(((H08000005994 3)))



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) 617-6383

Account Name

: LAZARUS CORPORATE FILING SERVICE

Account Number: 120000000019 Phone

: (305)552-5973

Fax Number

: (305)220-1440

FLORIDA/FOREIGN LIMITED LIABILITY CO.

DFHE PROMOTIONS LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

FAX NO. :3052201440 Jan. 08 2008 06:15PM P2

2003/004

H 08 0 0 0 0 0 5 9 9 4

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Comp	
(Must end with the words "Limited Liability Company "LLC.")	y," the abbreviation "L.L.C.," or the designation
ARTICLE II - Address: The mailing address and street address of Liability Company is:	f the principal office of the Limited
Principal Office Address:	Mailing Address:
1260 Stillwater To miami Beach, FL	1260 Stilluster D 13141 Miami Beach, FC
mianit	
ahove stated limited liability company at hereby accept the appointment as reg capacity. I further agree to comply with the proper and complete performance of	and to accept service of process for the the place designated in this certificate. I ristered agent and agree to act in this the provisions of all statutes relating to if my duties, and I am familiar with and as registered agent as provided for in 608, F.S.

(CONTINUED)

H 08 0 0 0 0 0 5 9 9 4

<u>Tide:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Derrick Eaglin 1260 Sty Mwater Dr. Mianu Beach, FL 33,
	2008 ALL:
·	PR S
	%R ↓
	m _Q D
-	
	(Use attachment if necessary)
ICLE V: Reflective date, if other than the	A F
IONAL) effective date is listed, the date must	be specific and cannot be more than five
ONAL) effective date is listed, the date must ess days prior to or 90 days after the d REQUIRED SIGNATURE:	be specific and cannot be more than five
ONAL) effective date is listed, the date must ess days prior to or 90 days after the d RECUTED SIGNATURE: Signature of a member or an au (In accordance with section 608, of this document constitutes an af	be specific and cannot be more than five late of filing.)
Signature of a member of an au (in accordance with section 608, of this document constitutes at a feat the facts st	be specific and cannot be more than five late of filing.) Attacked representative of a member. 408(3), Florida Statutes, the execution firmation under the panalties of perjury lated herein are true.)
Signature of a member of an au (in accordance with section 608, of this document constitutes at a feat the facts st	be specific and cannot be more than five late of filing.) Attentized representative of a member. 408(3), Florida Statutes, the execution firmation under the penalties of perjury lated herein are true.)

H 08 0 0 0 0 0 5 9 9 4

Certificate of Status (Optional)

Page 2 of 2