# 81713000121

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**EXAMINER** 



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SECRETARY OF THE

## . RE: WO90000 13/29

### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: D- Crow Enterprise LLC Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Wilbert Dawkins Name of Person	
Name of Person	
Firm/Company	
HOILY WOOD FI 33030.  City/State and Zip Code  Che Ida OI Dyahao. Com  E-mail address: (to be used for future annual report notification)	
Cene Ida 012 ya hoo. com  Email address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
WIBERT DAWKINS at 994- 833-4666 & 954-448-34  Name of Person Area Code & Daytime Telephone Number	948
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is enclosed)} Certified Copy (additional copy is enclos	
Mailing Address Registration Section Division of Corporations Division of Corporations Division of Corporations Division of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
D- CARW EM-ER PRISE  (Must end with the words "Limited Liability	Company," "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the print	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1633 Pemmore Rd. Hallandale, Fl 33009	1511 S. 24-tere HOTHWOOD.FT 33020
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)	
The name and the Florida street address of the reg	ristered agent are:
Wilbert DA Name	SECRETARY 27 VISION VIS
1511 5.24ta	ne 🚆 📑
Florida street address (P.O. B	
LOIN WWO City, State, and	
liability company at the place designated in this registered agent and agree to act in this capacity.  statutes relating to the proper and complete perfe	cept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

#### 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:

		Name and Address:
"MGR" = Manag "MGRM" = Man		
		1 in and Danking
MGL.	<del></del>	Wilbert Dawkins
		1511 S. 24 Leck Hollywood, FI 33020
		_
MGRM.	<del></del>	DeNelda V. Dawkins
		HOLLY WOOD FI 33000
		F10 (14 (2000), 17 ) 3000
	<u> </u>	
	<del></del>	
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LE V: Effective of fective date is list days after the da	date, if other than the oted, the date must be ate of filing.)  GNATURE:  Signature of a member (In accordance with sect of this document constitutat the facts stated here to be a stated	r or an authorized representative of a member.  tion 608.408(3), Florida Statutes, the execution intuition and affirmation under the penalties of perjury

of Registered Agent
\$ 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)