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(Requestor's Name)
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DIRECTOR DIVINITY DIVINITY
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# . COVER LETTER

TO:

Registration Section

Division of Co	orporations	
SUBJECT:	DASH PROP	PERTY INSPECTIONS LLC
	Name of Limit	ited Liability Company
The enclosed Articles of	of Organization and fee(s) are	e submitted for filing.
Please return all corresp	oondence concerning this matt	atter to the following:
	DA	ANIEL SHOSFY
		Name of Person
		Firm/Company
	6101	01 SW 123 TERR.
		Address
		MIAM FL 33156
		City/State and Zip Code  fydanny@gmail.com
	E-mail address: (to be used	d for future annual report notification)
For further information	concerning this matter, please	ase call:
	danny of Person	at (305)338 9696 Area Code & Daytime Telephone Number
Enclosed is a check f	or the following amount:	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	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  Section of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

crions LLC  pany," "L.L.C.," or "LLC.")  al office of the Limited Liability ( iling Address:  1 SW 123 TERR.  AMI FL 33156  ce, & Registered Agent's Signate an individual or ar	- - - ture:	ny is:
iling Address:  11 SW 123 TERR.  AMI FL 33156  ce, & Registered Agent's Signat	- - - ture:	ny is:
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rtificate, I hereby accept the appointment agree to comply with the produce of my duties, and I am familifiagent as provided for in Chapter	intment ovisions ar with	as of all and
2	ertificate, I hereby accept the appointment agree to comply with the promance of my duties, and I am familial agent as provided for in Chapter	ot service of process for the above stated libertificate, I hereby accept the appointment further agree to comply with the provisions mance of my duties, and I am familiar with diagent as provided for in Chapter 608, F.

(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:

"MGR" = Manage		me and Address:	
"MGRM" = Mana	ging Member		•
MGRM	DA	NIEL SHOSFY	
	<del></del>	01 SW 123 TERR.	
		AMI FL 33156	
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(Use attachment i	• •	CED 0 2000	
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LE V: Effective deffective date is listed days after the days afte	nte, if other than the date of fed, the date must be specific e of filing.)  NATURE:  Signature of a member or an author of this document constitutes and that the facts stated herein are the date of price of the date of this document constitutes and that the facts stated herein are the date of this document constitutes and that the facts stated herein are the date of the date	uthorized representative of a member.  408(3), Florida Statutes, the execution affirmation under the penalties of perjury ue.)  EL SHOSFY inted name of signee	siness days prior  SECRETARY  SECRETARY