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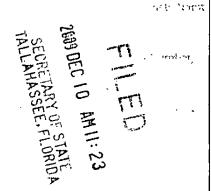
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M. THOMAS

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EXAMINER

COVER LETTER

то:	Registration Se Division of Cor		,		栽		
SUBJE	ECT:	and the second s		aint Wor			·
		Name of Limit	ed Liab	ility Compar	ıy		
The end	closed Articles of	Organization and fee(s) are	submitt	ed for filing.		, , , , , , , , , , , , , , , , , , ,	
Please	return all correspo	ndence concerning this mat	ter to th	e following:		•	
		R		Miraglia			
			Name o	f Person			TALLAHASSEE
			Firm/C	ompany	•		2000
		102		0th Ave.			O F
			Add	iress			F1.07
		-		, FL 3302	.0		RIGHT 23
			•	nd Zip Code			و و
-		E-mail address: (to be used	a1369	@juno.co annual repor	om t notification	n)	
For furt	ther information co	oncerning this matter, please	e call:				/
		t Miraglia	_ at (954)		816-2628	
	Name of	f Person		Area Code &	& Daytime T	Telephone Number	
Enclos	ed is a check for	the following amount:					
/ \$125.0	00 Filing Fee [\$130.00 Filing Fee & Certificate of Status	Ce	5.00 Filing rtified Copy ditional copy	У	Certified C	of Status &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street/Cou Registration Division o Clifton Bu 2661 Exec Tallahasse	n Section f Corporati ilding utive Cente	ons er Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nam			
The name of the Lir	mited Liability Compan	ny is:	
	Davadiaa Da	int Monto III C	
		int Works LLC Liability Company," "L.L.C.," or "LL	
(IVIUS	st end with the words. Limited	Liability Company, E.E.C., of EE	
ARTICLE II - Add	dress:		SEL
		he principal office of the Lim	ited Liability Company
5			A STATE OF THE STA
Principal Office Ac	ddress:	Mailing Address:)ALE 23
			7
1023 N 20th Ave.		1023 N 20th Ave.	
Hollywood, FL 330	020	Hollywood, FL 3302	0
111 EC . 1 . 1 EU EU . 1	<u> </u>		
ADDICTETT		4 1066 0 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1	\4!- C!4
The Limited Liability Cor	gistered Agent, Regist	tered Office, & Registered A Registered Agent. You must designate	an individual or another
	ctive Florida registration.)	rogistered rigem. For must designate	an marriagar or anoption
TI 1 41 - F	9		
The name and the F	iorida street address of	the registered agent are:	
	Robe	ert Miraglia	
-	-	Name	
-		N 20th Ave.	
	Florida street address	(P.O. Box NOT acceptable)	
	Hollywood, FL 330	020 _{FL}	
-	City, St	tate, and Zip	
	•	•	

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 as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQURED)

(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:

	Name and Address:
"MGR" = Manager "MGRM" = Managing Membe	er
MGRM	Robert Miraglia
	1023 N 20th Ave.
	Hollywood, FL 33020
	F.F.S.
	35
	
(Use attachment if necessary)	
•	han the date of filing: . (OPTIONAL)
CLE V: Effective date, if other the effective date is listed, the date	han the date of filing: (OPTIONAL) must be specific and cannot be more than five business days p
CLE V: Effective date, if other the effective date is listed, the date of days after the date of filing.)	· · · · · · · · · · · · · · · · · · ·
CLE V: Effective date, if other the effective date is listed, the date	· · · · · · · · · · · · · · · · · · ·
CLE V: Effective date, if other to effective date is listed, the date to days after the date of filing.) REQUIRED SIGNATURE:	· · · · · · · · · · · · · · · · · · ·
CLE V: Effective date, if other to effective date is listed, the date of days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this document)	must be specific and cannot be more than five business days p Bert Muaglia
CLE V: Effective date, if other to effective date is listed, the date of days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance of this document)	must be specific and cannot be more than five business days p Det Muaglia member or an authorized representative of a member. with section 608.408(3), Florida Statutes, the execution ent constitutes an affirmation under the penalties of perjury

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)