## L10000070998

(Requestor's Name)		
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PICK-UP WAIT MAIL		
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EFFECTIVE DATE

FILED

10 JUL -2 AM II: 28
SECRETARY OF STATE
ANALYSEF, FLORIDA

## **COVER LETTER**

10:	Negistration Section  Division of Corporations
SUВЛ	ECT: Dawning of Aquarius
	Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Dawn A. Degani
	Name of Person
	Dawning of Aquarius
	Firm/Company
	8477 Blue Cypress Drive
	Address
	Lake Worth, Florida, 33467
	City/State and Zip Code
	deganidawn@yahoo.com  E-mail address: (to be used for future annual report notification)
For fur	ther information concerning this matter, please call:
Dawn	at ( 561 ) 329-2069
	Name of Person Area Code & Daytime Telephone Number
Enclos	sed is a check for the following amount:
<b>□\$</b> 125.	.00 Filing Fee \$\square\$\$130.00 Filing Fee & \$\square\$\$\$155.00 Filing Fee & \$\square\$
	Certificate of Status Certified Copy 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 Corporations Clifton Building Tallahassee, FL 32314  Street/Courier Address Registration Section Division of Corporations Clifton Building Tallahassee, FL 32314
enc	Tallahassee, FL 32301  L CONGY MATION TO the Mailing Address:  A Queen Victoria Dr.
2/04	Mancen Victoria Dr.
ees	burg, [01,34747.

Dawn. A. Degani

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

Dawning of Aquarius L.L.C., (Must end with the words "Lim	nited Liability Company, "L.L.C.," or "LLC.")	<del>ob vo antare</del>
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liab	oility Company is:
Principal Office Address:	Mailing Address:	
8477 Blue Cypress Drive	5404 Queen Victoria Drive	
Lake Worth, Fla, 33467	Leesburg, Fl, 34748	<del></del>
		Security of the Security of th
	gistered Office, & Registered Agent's Sown Registered Agent. You must designate an individu	al or another
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	gistered Office, & Registered Agent's Sown Registered Agent. You must designate an individu	aal or another  SECRE
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address	gistered Office, & Registered Agent's Sown Registered Agent. You must designate an individu	aal or another  SECRE
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address	gistered Office, & Registered Agent's Sown Registered Agent. You must designate an individual of the registered agent are:	aal or another  SECRE
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address  Dawn A. Degani  8477 Blue Cypres	gistered Office, & Registered Agent's Sown Registered Agent. You must designate an individual of the registered agent are:	aal or another  SECRE
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)  The name and the Florida street address  Dawn A. Degani  8477 Blue Cypres	gistered Office, & Registered Agent's Sown Registered Agent. You must designate an individual of the registered agent are:  Name S Drive Street address (P.O. Box NOT acceptable)	FIL SECRETAR TALLAHASS

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 (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:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member  MGR	Dawn A. Degani 8477 Blue Cypress Drive, Lake Worth, Fla, 33467
<del></del>	
<del></del>	
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be spet to or 90 days after the date of filing.)	of filing: $\frac{06/30/2019}{DQD}$ (OPTIONAL) ecific and cannot be more than five business days prior
REQUIRED SIGNATURE:	FILED FILED
(In accordance with section	an authorized representative of a member.  608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury

30

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

Dawn A. Degani

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee