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J. SAULSBERRY EXAMINER

MAR 09 2011

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: DLB METALS INTERNATIONAL 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:
Donald Braxton
Name of Person
DLB METAIS INTERNATIONAL LLCERGY P
Firm/Company
3440 Hollywood BIVD SHE 4/30 N
Address
Hollywood F1 33021 City/State and Zip Code
City/State and Zip Code
City/State and Zip Code OLB 137US a) YAhao. Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mala Brafto at (786) 683-7828
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 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 AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 32314Z661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
DLB METALS II. (Must end with the words "Limited Liability")	NTEMATIONAL LLC
(Mass old with the words Infilited Liability	Company, E.E.C., or EEC.
ARTICLE II - Address: The mailing address and street address of the prince	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3440 Hollywood Blvd #415" Hollywood FL 33021	SAME
	istered agent are: 4 Club Drive + 2005 S(P.O. Box NOT acceptable) A Agent. You must designate an individual orangement are: A HAR THE HAR
Having been named as registered agent and to accept liability company at the place designated in this registered agent and agree to act in this capacity. statutes relating to the proper and complete performancept the obligations of my position as register.	s certificate, I hereby accept the appointment as I further agree to comply with the provisions of all ormance of my duties, and I am familiar with and red 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:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Donald Broffon 19877 & Country Club drive + aventura FC 35180
	7 20 Z
Name of the State	CRE AR
(Use attachment if necessary)	7 PM 12: EE. FLORI
CLE V: Effective date, if other than the	date of filing: (PTIONAL)
	e specific and cannot be more than five business days pr

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Dona LD Brax to N

Typed or printed name of signee

Filing Fees:

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

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