# L11000096884

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	⊋ #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
MILDOODI	12465	

Office Use Only

EFFECTIVE DATE 08/08/11



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SECRETARY OF STATE FALLAHASSEE, FLORIO

D. BRUCE

AUG 24 2011

**EXAMINER** 



### FLORIDA DEPARTMENT OF STATE Division of Corporations

August 15, 2011

DAWN BERTOLLI 4216 4TH AVE NORTH ST PETERSBURG, FL 33713

SUBJECT: DMB, L.L.C.

Ref. Number: W11000042465

11 AUG -8 AM 8: 56
SECRETARY OF STATE
FALLAHASSEE, FLORIDA

We have received your document for DMB, L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 911A00019068

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: DMB,L.L.C.		
	ed Liability Company	
The enclosed Articles of Organization and fee(s) are Please return all correspondence concerning this mat	-	
Dawn Bertolli		
	Name of Person	
DMB, L.L.C.		
	Firm/Company	
4216 4th Ave North		AHA AHA
	Address	SSE &
Saint Batamburg Florida 227	12	
Saint Petersburg,Florida 337	ty/State and Zip Code	
dawnbertolli@ymail.com		56 RIDA
	for future annual report notification)	
For further information concerning this matter, pleas	e call:	
Dawn Bertolli	at (727 ) 512-7824	
Name of Person	Area Code & Daytime Telephone Num	iber
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times 130.00 Filing Fee & Certificate of Status	Certified Copy Certific (additional copy is enclosed) Certifie	Diffing Fee, sate of Status & ad Copy al 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 2661 Executive Center Circle	

Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Principal Office Addres	Mailing Address:
<b>ARTICLE II - Address</b> The mailing address and	reet address of the principal office of the Limited Liability Company is:
<del></del>	h the words "Limited Liability Company, "L.L.C.," or "LLC.")
DMB-L-L.C.	TIT BY DAWN LLC.
The name of the Limited	iability Company is:

ARTICLE I - Name:

MBLLC. Hairby Dawn, Lt.C.	Dawn Bertolli
709 1st Ave S	4216 4th Ave N
aint Petersburg, Florida 33707	Saint Petersburg, Florida 33713

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual compother business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Dawn Bertolli

Name

4216 4th Ave North

Florida street address (P.O. Box NOT acceptable)

Saint Petersburg, FL 33713

City, State, 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 (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: Name and Address: "MGR" = Manager "MGRM" = Managing Member **MGRM** Dawn Bertolli 4216 4th Ave North Saint Petersburg, Florida 33713 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: 8-8-2011 . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **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.) Dawn Bertolli Typed or printed name of signee

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

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