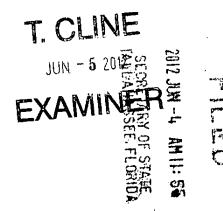
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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06/04/12--01037--003 \*\*125.00



## COVER LETTER

	ation Section n of Corporations	•	•
SUBJECT: D	B Invest Two LLC		
	Name of Limite	d Liability Company	
The enclosed Art	cicles of Organization and fee(s) are s	ubmitted for filing.	
Please return all	correspondence concerning this matter	er to the following:	
<u>Joel</u>	Medgebow, Esq.		
		Name of Person	·
<u>Med</u>	gebow Law, P.A.		
		Firm/Company	
4875	Coconut Creek Pa	akrway	
		Address	
Coconu	ut Creek, FL 33063		
		State and Zip Code	
Joel@	Medgebowlaw.com; di.c E-mail address: (to be used fo		
For further inform	nation concerning this matter, please	•	
Joel Medge	ebow	954 479	R- <b>//</b> 223
<u></u>	Name of Person	at (954 ) 478 Area Code & Day	time Telephone Number
5 1 1: 1	1.6.4.69		
	eck for the following amount:	<del>_</del>	
\$125.00 Filing Fe	ce\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee Certified Copy (additional copy is encl	Certificate of Status &
	Mailing Address  Posistation Section	Street/Courier	
	Registration Section Division of Corporations	Registration Section Division of Corp	porations 👼 🍋
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive	

Tallahassee, FL 32301

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

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

### **DB Invest Two LLC**

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
1345 Oyster Bay	1345 Oyster Bay
North Palm Beach, FL 33408	North Palm Beach, FL 33408

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 or another business entity with an active Florida registration.)

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

Joel Medgebow, Esq.

Name

4875 Coconut Creek Parkway

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

Coconut Creek,

FL 33063

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:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Daniel Bouaziz	
MGRM	Viviane Allouche	
(Use attachment if necessary)		
(Use attachment if necessary)  CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)	e date of filing: (OPTIONA)  oe specific and cannot be more than five business days	L) s p
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CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:	pe specific and cannot be more than five business days	L) s p
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:	pe specific and cannot be more than five business days  er or an authorized representative of a member.	L) s p
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of	er or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State of the penalties of perjury that the facts stated herein are true.	s p
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\$ 5.00 Certificate of Status (Optional)