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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	
Special Instructions to Filing Officer:		
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Office Use Only



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Effective 8-10-12

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SECRETARY OF STATE
AND ASSEE FLORIS



COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJI	Name of Limited Liability Company		<u></u>	
The en	nclosed Articles of Organization and fee(s) are submitted for filing.			
Please	e return all correspondence concerning this matter to the following:			
	Danita Flag			
	Darita Dio UC Firm/Company			
	2404 NE 13th Ave	SECR	_ 12 _	
	Corresville, F1 3264) City/State and Zip Code	ETARY	UN Z'I	
	City/State and Zip Code	OF SIIA	∰ :: 5	
For fu	urther information concerning this matter, please call:		O	
\supset	Name of Person at (352) 727-916) Area Code & Daytime Telephone Number	·	_	
Enclos	osed is a check for the following amount:			
\$125.00	Of Filing Fee \$\bigs\\$130.00 Filing Fee \$\bigs\\$155.00 Filing Fee \$\bigs\\$\$\left\\$160.00 Filing Fee \$\bigs\\$\$\left\\$160.00 Filing Fee \$\bigs\\$\$\left\\$Certified Copy (additional copy is enclosed)	of Si Copy	tatus d	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle			

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Danita Dior UC (Must end with the words "Limited L	ciability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1801 HE 28rd Ave Gainesville, Pl 32609	Esinesulle Fl 32641
<u> </u>	ered Office, & Registered Agent's Signature:

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 eronother business entity with an active Florida registration.)

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

| Daniel | Signature: | Signatu

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)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Denita Flagg 2404 NE 132 Are Gamesville Fl 3264)
	SEUR A
	FF TO THE PARTY OF
(Use attachment if necessary)	3 3 3 3 3 3 3 3 3 3

ARTICLE V: Effective date, if other than the date of filing: ________. (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.)

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)