L13000/14102

(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:
'AUG 1 3 2013
A. LUNT

Office Use Only



300250221433

08/09/13--01013--010 **125.00



COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

DJC Real Estate Investing

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:

Joel Chavez	
Name of Person	
DJC Real Estate Investing	
Firm/Company	
19239 N. Dale Mabry Hwy, Suite 251	2013
Address	
Lutz, Florida 33548	
City/State and Zip Code	-17
djcrealestateinvesting@live.com	.
E-mail address: (to be used for future annual report notification)	<u> </u>

For further information concerning this matter, please call:

Dina Ramadan	_{at} 813 , 5	507-3408
Name of Person	Area Code & I	Daytime Telephone Number

Enclosed is a check for the following amount:

\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
			(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
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

DJC Real Estate Investing, LLC				
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")		-	
ARTICLE II - Address:				
The mailing address and street address of the pri	incipal office of the Limited Lia	ability (Compai	ıy is:
Principal Office Address:	Mailing Address:			
19239 N. Dale Mabry Hwy, Suite 251	19239 N. Dale Mabry Hwy, Suit	e 251		
Lutz, FL 33548	Lutz, FL 33548		_	
	ress (P.O. Box <u>NOT</u> acceptable)		2013 AUS - 9 PH IS 51	7 m
Luiz, FL 333				
Lutz, FL 335 City, Sta	te, and Zip			mited

Page 1 of 2

(CONTINUED)

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

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

WILLIE	" - Managan		Name and Address:	
	" = Manager M" = Managi	ng Member		
MGR			Joel Chavez	
			3812 Misty Willow Way	
			Lutz, FL 33558	
MGR			Dina Ramadan	
			3812 Misty Willow Way	
			Lutz, FL 33558	
				m - 20
				194
				<u> ف</u> ف
				72
(Hise at		iccessai y j		
	Effective date	e, if other than the	he date of filing:	
TICLE V: n effective r to or 90	Effective date e date is liste	e, if other than the date much date of filing.)	st be specific and cannot be more	
TICLE V: n effective r to or 90	Effective date date is listed days after the GIRED SIGN	e, if other than the d, the date muse date of filing.) ATURE:	est be specific and cannot be more	than five business
TICLE V: n effective r to or 90	Effective date date is listed days after the GIRED SIGN	e, if other than the d, the date muse date of filing.) ATURE:	st be specific and cannot be more	than five business
TICLE V: n effective r to or 90	Effective date e date is liste days after the UIRED SIGN Sign (In accordance) Constitutes Lam aware	e, if other than the d, the date muse date of filing.) ATURE: gnature of a memory ance with section 6 an affirmation unce that any false info	est be specific and cannot be more	nember. this document ed herein are true.
TICLE V: n effective r to or 90	Effective date e date is liste days after the UIRED SIGN Sign (In accordance) Constitutes Lam aware	e, if other than the d, the date muse date of filing.) ATURE: gnature of a memory ance with section 6 an affirmation unce that any false info a third degree felo	bet or an authorized representative of a modeler the penalties of perjury that the facts state remation submitted in a document to the Dep	nember. This document ed herein are true. artment of State

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)