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SECRETARY OF STATE

APR 17 2014
J. HARRIS

COVER LETTER

TO:	Registration Division of C	Section Corporations		
SUBJ	ECT: DLJ Co	ntracting LLC. Name of Lin	nited Liability Company	
The en	closed Articles	of Organization and fee(s) ar	e submitted for filing.	
Please	return all corre	spondence concerning this m	atter to the following:	
		Daniel A Lo		· · · · · · · · · · · · · · · · · · ·
			Name of Person	
		DLJ Contra	acting LLC.	i
			Firm/Company	
		503 NE 3rd Ave		
			Address	
		Okeechobee, Florida 34	4972	
		C	ity/State and Zip Code	
		dlopez2095@yahoo.coп E-mail address: (to be use	n d for future annual report notifica	ation)
For fu	rther informatio	n concerning this matter, plea	ase call:	
Danie	A Lopez Jr	at (7	772) 323 8268	
	Nar	ne of Person		lephone Number
Enclos	sed is a check fo	or the following amount:		
□ \$125.0	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)
		iling Address	Street/Courier Add	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
DLJ Contracting LLC.		
(Must end with the words "Li	imited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the princ	ipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
503 NE 3rd Ave	503 NE 3rd Ave	
Okeechobee, FL 34972	Okeechobee, FL 34972	
ARTICLE III - Registered Agent, Registered O		
	s own Registered Agent. You must designate an individual or stration.)	
(The Limited Liability Company cannot serve as its another business entity with an active Florida regis	s own Registered Agent. You must designate an individual or stration.) stered agent are:	
(The Limited Liability Company cannot serve as its another business entity with an active Florida regis The name and the Florida street address of the regi	s own Registered Agent. You must designate an individual or stration.) stered agent are:	
(The Limited Liability Company cannot serve as its another business entity with an active Florida regis The name and the Florida street address of the regi	s own Registered Agent. You must designate an individual or stration.) stered agent are: Jr Name	
(The Limited Liability Company cannot serve as its another business entity with an active Florida regis The name and the Florida street address of the regi	s own Registered Agent. You must designate an individual or stration.) stered agent are: Jr Name	
(The Limited Liability Company cannot serve as its another business entity with an active Florida regis The name and the Florida street address of the regis Daniel A Lopez 503 NE 3rd Ave	s own Registered Agent. You must designate an individual or stration.) stered agent are: Jr Name	

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

14 APR 15 AM 11: 28

<u>Title:</u>			Name and Address:		
	"AMBR" = Authorized Memb	per			
"MGR" = Manager					
	President		Daniel A Lopez Jr 503 NE 3rd Ave		
			Okeechobee, FL 34972		

	(Use attachment if necessary)				
(If an e	CLE V: Effective date, if other the ffective date is listed, the date is confiling.)	an the date of filing must be specific an	d cannot be more than five business days prior to or 90 days af	tei	
the ann	e or raing.)				
ARTIC	LE VI: Other provisions, if any.				
	REQUIRED SIGNATURE:				
		09/2/	2		
	Simoto				
			an authorized representative of a member. 1) (b), Florida Statutes, the execution of this document		
			alties of perjury that the facts stated herein are true.		
			ubmitted in a document to the Department of State		
			vided for in s.817.155, F.S.)		

Daniel A Lopez Jr
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)

ARTICLE IV-

Page 2 of 2