

L15000085787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

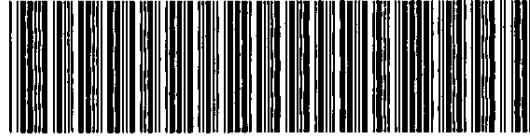
(Business Entity Name)

(Document Number)

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15 MAY 11 AM 8:17
STATE
OFFICE OF
RECORDS & ADMINISTRATION
TALLAHASSEE, FLORIDA

1 Sheet MAY 15 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DRAGON ESTATE LLC
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:

SVETLANA KARPOVA
Name of Person
DRAGON ESTATE LLC
Firm/Company
1717 BUCHANAN STREET
Address
HOLLYWOOD FL 33020
City/State and Zip Code
karposve@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Svetlana Karpova 786 241-3280
Name of Person at () Area Code 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)

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

Street Address
Registration Section
Division of Corporations
Clifton Building
2661 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:

DRAGON ESTATE 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:

1717 BUCHANAN STREET

18401 COLLINS AVE, APT. 100-261

HOLLYWOOD

SUNNY ISLES BEACH

FL. 33020

FL 33160

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:

SVETLANA KARPOVA

Name

1717 BUCHANAN STREET

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

HOLLYWOOD

FL

33020

City

State

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 605, F.S..

Karpova
Registered Agent's Signature (REQUIRED)

(CONTINUED)

15 MAY 11 AM 8:17
STATE OF FLORIDA
DEPARTMENT OF REVENUE

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:
"AMBR" = Authorized Member
"MGR" = Manager
AMBR

Name and Address:
SVETLANA KARPOVA
1717 BUCHANAN STREET
HOLLYWOOD, FL 33020


(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 5/5/2015 (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203(1)(b), 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.)

SVETLANA KARPOVA

Typed or printed name of signee

FILED
MAY 11 AM 8:17
TALLAHASSEE
FLORIDA
DEPARTMENT 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)