

L15000110368

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

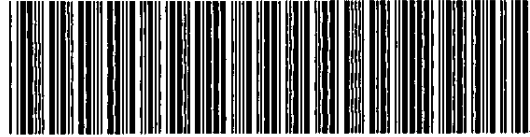
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUN 25 PM 3:13

APPROVED
AND
FILED

V/H

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DAZAYU 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:

JOSE LUIS SPINATTO
Name of Person

Firm/Company

5161 32nd AVE SW
Address

NAPLES, FL 34116
City/State and Zip Code

spinattojl@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOSE L. SPINATTO at (239) 537 7321
Name of Person 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

APPROVED
AND
FILED

15 JUN 25 PM 3:19

ARTICLE I - Name:

The name of the Limited Liability Company is:

DAZAYU LLC.

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II - Address:

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

Principal Office Address:

5161 32nd AVE SW
NAPLES FL 34116

Mailing Address:

5161 32nd AVE SW
NAPLES FL 34116

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:

JOSE LUIS SPINATTO

Name

5161 32nd AVE SW

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

NAPLES FL 34116

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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AND
FILED

15 JUN 25 PM 3:13

ARTICLE IV-

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

| | | | |
|-------------------------------|------|-------------------------|------|
| _____ | AMBR | PERCI GOFREI EID ROMERO | 60% |
| _____ | | 5161 32nd AVE SW | |
| _____ | | NADES FL 34116 | |
| _____ | MGR | ELVA FRANCO de EID | 10% |
| _____ | | SAME ABOVE | |
| _____ | MBR | DAYANA EID FRANCO | 10% |
| _____ | | SAME ABOVE | |
| _____ | MBR | ZAYED EID FRANCO | 10% |
| _____ | | SAME ABOVE | |
| (Use attachment if necessary) | MBR | YUBRANI EID FRANCO | 10% |
| | | SAME ABOVE | |
| | | | 100% |

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

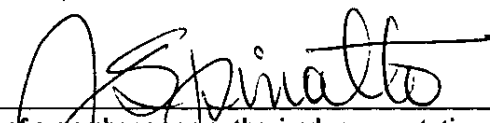
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

| | | | |
|--------------------|-----|--------------------|-----|
| PERCI EID ROMERO | 60% | ZAYED EID FRANCO | 10% |
| ELVA FRANCO de EID | 10% | YUBRANI EID FRANCO | 10% |
| DAYANA EID FRANCO | 10% | | |

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.)

JOSE LUIS SPINATTO

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)