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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Deca Investments and Holdings 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:
Eric Rebinson
Name of Person
·
Firm/Company
25202 SW 17-4 Aul
City/State and Zip Code City/State and Zip Code Company Comp
For further information concerning this matter, please call:
Cric Relation at (217) 853-3137 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 (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address New Filing Section New Filing Section

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

New Filing 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:			
Deca Investments ar	of Holdings ILC	<u> </u>	
(Must end with the words "Limited Liability Co	mpany, "L.L.C.," or "LLC.")	· თ	
ARTICLE II - Address:	. Ti ∴ Ti >- c.	EB33	
The mailing address and street address of the principal office of the L	imited Liability Company is:	င်း	j
Principal Office Address:	Mailing Address:	PH	į 1
25202 SW 17th Ave	25202 SW 1745A	္ကမ္း - (၁)	*
Acutain T. Salas	77700119		

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:

ARTICLE I - Name:

145 koneys selection of Florida street address (P.O. Box NOT acceptable)

La Jana Fl 32333 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)

Page 1 of 2

itle: AMBR" = Authorized Member	Name and Address:
MGR" = Manager	施 子 門 <u>·</u>
	ਜ ਹਜ਼
MRR	F. DC.
MDI	25202 SIN 17+1 Ave
AIRR	New horry F 1 32669
AMBA	Jessica Cobinson
	Newberry P1 32669
V: Effective date, if other than the dative date is listed, the date must be s	te of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or
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