

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000170913 3)))



H160001709133ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
DYNAMIC SCREEN PRINTING LLC**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

113358

Electronic Filing Menu

Corporate Filing Menu

Help **S. GILBERT**

RECEIVED

16 JUL 15 PM 4:45

TALLAHASSEE, FLORIDA

TALLAHASSEE, FLORIDA

16 JUL 15 AM 8:02

113358

JUL 17 2017

(4)

H10000170913

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DYNAMIC SCREEN PRINTING 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:

JEROME HARRIS

Name of Person

DYNAMIC SCREEN PRINTING LLC

Firm/Company

1531 NW 3RD STREET, #6

Address

DEERFIELD BEACH, FL 33442

City/State and Zip Code

tyjake@earthlink.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JEROME HARRIS

954

242-4449

at ()

Name of Person

Area Code

Daytime Telephone Number

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
16 JUL 15 AM 8:02

ARTICLE I - Name:

The name of the Limited Liability Company is:

DYNAMIC SCREEN PRINTING 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:

1531 NW 3RD STREET, #6
DEERFIELD BEACH, FL 33442

SAME

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:

JEROME HARRIS

Name

1531 NW 3RD STREET, #6

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

DEERFIELD BEACH FL 33442

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.,

Jerome Harris
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR/AMBR

Name and Address:

JEROME HARRIS

1531 NW 3RD STREET, #6

DEERFIELD BEACH, FL 33442

(Use attachment if necessary)

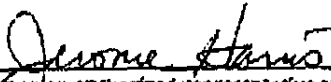
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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 2.817.155, F.S.

JEROME HARRIS

Typed or printed name of signor

H16000170913