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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

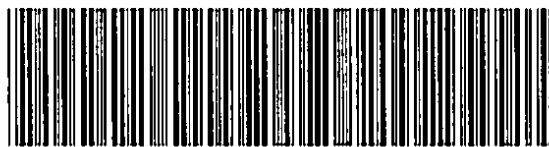
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K. Brumbley

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DY SOGEN, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Durojaiye Law Firm, P.A.  
BABATOLA DUROJAIYE  
3632 Land O Lakes BLVD, 105  
Land O' Lakes, Florida 34639  
E-mail address (to be used for future annual report notification): bdurojaiye@durojaiyelaw.com

For further information concerning this matter, please call:

Durojaiye Law Firm, P.A. at (813) 996-1895

Enclosed is a check for the following amount: \$130.00 Filing Fee and Certificate of Status

**MAILING ADDRESS:**

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

**STREET/COURIER ADDRESS:**

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

ARTICLES OF ORGANIZATION  
OF  
DYSOGEN, LLC

ARTICLE I - NAME

The name of the limited liability company is DYSOGEN, LLC, ("company").

ARTICLE II - ADDRESS

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

Principal Office Address:

1936 Bruce B Downs BLVD, #439  
Wesley Chapel, Florida 33543-9262

Mailing Address:

1936 Bruce B Downs BLVD, #439  
Wesley Chapel, Florida 33543-9262

ARTICLE III - REGISTERED AGENT,  
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

Babatola Durojaiye Esq, Durojaiye Law Firm P.A.  
3632 Land O Lakes BLVD, Suite 105  
Land O Lakes, Florida 34639

*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.*

  
Babatola Durojaiye Esq, Durojaiye Law Firm P.A.

ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

"MGR" = Manager

"AMBR" = Authorized Member

Name and Address:

· AMBR

Dennis Maher  
1936 Bruce B Downs BLVD, #439  
Wesley Chapel, Florida 33543-9262

AMBR

Eugenia C. Maher  
1936 Bruce B. Downs BLVD, #439  
Wesley Chapel, Florida 33543

#### ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be January 1, 2018.

#### ARTICLE VI - OTHER MATTERS

The Company will be managed by elected members

#### 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 s.817.155, F.S.

Eugenia C. Maher

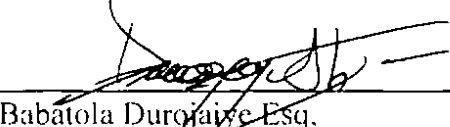
\_\_\_\_\_  
Typed or printed name of signee

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY DY SOGEN, LLC, SUBMITS THE  
FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND  
REGISTERED AGENT IN THE STATE OF FLORIDA:

1. The name of the Limited Liability Company is DY SOGEN, LLC.
2. The name and the Florida street address of the registered agent and office are:  
Babatola Durojaiye Esq.  
Durojaiye Law Firm P.A.  
3632 Land O Lakes BLVD, Suite 105, Land O Lakes, Florida 34639

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, Florida Statutes.

  
\_\_\_\_\_  
Babatola Durojaiye Esq.  
Durojaiye Law Firm P.A.  
Registered Agent