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SECRETARY OF STATE

N CULLIGAN JAN 8 2018

COVER LETTER

TO:	New Filing Section Division of Corporations
CUDIE	DILA ENTERPRISE, LLC
SUBJE	Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	ARIEL BATISTA
	Name of Person
	Firm/Company
	302 BEVERLY BLVD
	Address
	BRANDON FLORIDA 33511
	City/State and Zip Code
	dilaenterpriselle.gmail.com
	E-mail address: (to be used for future annual report notification)
For fu r th	ner information concerning this matter, please call:
	ARIEL BATISTA 813 403-4822 at ()
	Name of Person Area Code Daytime Telephone Number
. .	
Enclos	ed is a check for the following amount:
\$ 125.0	Of Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}

Mailing Address

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

New Filing 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:					
DILA ENTERPRISE,	LLC					
(Must contai	n the words "Limited	Liability Compan	y, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street add	lress of the principal o	office of the Limite	ed Liability Company is:			
<u>Principal</u>	Office Address:		Mailing Addr	<u>ess</u> :		
302 BEVERLY BLVI			2 BEVERLY BLVD			
BRANDON, FLORID	A 33511	<u></u>	RANDON, FLORIDA 3351	<u> </u>		
ARTICLE III - Registered Ager (The Limited Liability Company of another business entity with an ac-	annot serve as its own tive Florida registration	n Registered Agen on.)		SECRETARY JALLAHASSE	18 JAN	<u>F</u>
	ARIEL BATISTA			SSI SSI	-5	:
		Name		# # P	A.H	
	302 BEVERLY BLY	VD		FLO	Ö	` <i>'</i>
	Florida street addres	ss (P.O. Box <u>NOT</u>	acceptable)	STATE LORIDA): 36	
	BRANDON	FLORIDA	33511	D	တ	
	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)

"AMBR" = Au	horized Member	Name and Address:	
"MGR" = Mana			
MGR		Ariel Batista	
·		802 Beverly Blvd	_
		Brandon, Florida 33511	_
AMBR		4 1 1 D 2 1 1 1	
ANIDK		Ariel Batista Jr 802 Beverly Blvd	_
		Brandon, Florida 33511	_
		Dialidoli, Florida 33311	-
			
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The name and address of each person authorized to manage and control the Limited Liability Company:

. ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)