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SECRETARY OF STATE
TAIL AHASSEE, FL

COVER LETTER

	New Filing Section Division of Corporations					
SUBJEC	DiNamic Concepts, L.L.C.					
Name of Limited Liability Company						
The enclo	sed Articles of Organization and fee(s) are submitted for filing.					
Please ret	arn all correspondence concerning this matter to the following:					
	Diane Carpenter					
	Name of Person					
	DiNamie Concepts, L.L.C.					
	Firm/Company					
	1713 Shadyrest Ct.					
Address						
	Lake Mary, Florida 32746					
	City/State and Zip Code					
	deardamone@cfl.rr.com E-mail address: (to be used for future annual report notification)					
r . c .a.						
ror turther	information concerning this matter, please call:					
	Diane Carpenter 407 402-1551					
	Name of Person Area Code Daytime Telephone Number					
Enclosed	is a check for the following amount:					
\$125.00 F	S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed)					

Mailing Address

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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:						
DiNamic Concepts, L	.L.C.					
(Must conta	in the words "Limited	Liability Company, "	L.L.C.," or "LLC.")			
ARTICLE II - Address:						
The mailing address and street ad	ldress of the principal c	office of the Limited I	Liability Company is:			
Principal Office Address:			Mailing Address:			
1713 Shadyrest Ct.	1713 Shadyrest Ct.		1713 Shadyrest Ct.			
Lake Mary, Florida 3:	2746	Lake	Lake Mary, Florida 32746			
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its owr	n Registered Agent, Y	's Signature: ou must designate an individual or			
The name and the Florida street address of the registered agent are:						
Diane Carpenter						
Name						
	1713 Shadyrest Ct.					
Florida street address (P.O. Box NOT acceptable)						
	Lake Mary	Florida	32746			
	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..

(CONTINUED)

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SECRETARY OF STATE

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address;
"MGR" = Manager	
MGR	Diane Carpenter
	1713 Shadyrest Ct.
	Lake Mary, Florida 32746
	
(If an effective date is listed, the date must be spo the date of filing.)	of filing: 1/1/2019 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days after neet the applicable statutory filing requirements, this date will not be listed as of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
Signature of a me This document is execut I am aware that any false	ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes. c information submitted in a document to the Department of State c felony as provided for in s.817.155, F.S.
Diane carpenter	Typed or printed name of signee

as

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)