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(Ře	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVERLETTER

TO:	New Filing Section Division of Corporations		
SUBJI	ECT: Daz Property Sotutions LC. 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:		
	Decriss Stevens Name of Person		
	3404 Reserve D. 12521		
	Tulluhussee, Fl. 32311 City/State and Zip Code		
	City/State and Zip Code (LUZAS II C Cymul - com E-mail address: (to be used for future annual report notification)		
For furt	E-mail addréss: (to be used for future annual report notification) her information concerning this matter, please call:		
	Name of Person Area Code Daytime Telephone Number		
	sed is a check for the following amount:		
]\$125.	00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee. Certified Copy (additional copy is enclosed)		
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Duz Property Solutions LL	
(Must contain 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:
34104 Reserve Dr. 42521	3909 Reserve D. 62521
Tull achiesser, Fl 32311	Tullmhuss F1. 32311
ARTICLE III - Registered Agent, Registered Office, & Register Climited Liability Company cannot serve as its own Register another business entity with an active Florida registration.) The name and the Florida street address of the registered agent a	ered Agent. You must designate an individual or
Darriss Steve	as
Name	
3404 Beserve D.	# 2521
Florida street address (P.O.	Box <u>NOT</u> acceptable)
Talluhesse Pl.	37311
City S	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)

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

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)