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To:

Division of Corporations

Fax Number : (850)617-6381

From:

: CLARA GIRALDO, P.A. Account Name

Account Number : I19990000017 Phone : (305)485-9300

Fax Number : (305)485-1098

\*\*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. **DUM SOFT DEVELOPMENTS LLC**

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **DUM SOFT DEVELOPMENTS, LLC**

ARTICLE I - NAME

The name of the Limited Liability Company is:

#### **DUM SOFT DEVELOPMENTS, LLC**

**ARTICLE II - ADDRESS** 

The principal office of the Limited Liability Company is:

4300 BISCAYNE BLVD SUITE 203 MIAMI FL, 33137

The mailing address shall be:

262 W 925 S GARLAND UT, 84312 DISMAR 13 AM 9: 3
SECRETARY OF STATE
LLAHASSEE, FLORID

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

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

**JAVIER E. MUNOZ** 

4300 BICAYNE BLVD SUITE 203
Florida Street address (P.O.BOX NOT acceptable)
MIAMI FL, 33137
City, State, and 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

#### ARTICLE IV- MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

JAVIER E. MUNOZ 262 W 925 S GARLAND, UT 84312

MANAGER

MELISA MUNOZ A. 4300 BISCAYNE BLVD SUITE 203 MIAMI FL. 33137

**MANAGER** 

(An additional article must be added if an effective date is requested)

Signature of a member of an authorized representative of a member.

(in accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

JAVIER E. MUNOZ
Typed or printed name of signee