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Division of Corporations **Electronic Filing Cover Sheet**

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	Account Name : LAZARUS CORPORATE FILING SERVICE, INC.		AM 11: 5	
	Account Number : I29000000019	P	··	
	Phone : (305)552-5973 Fax Number : (305)675-5944	<u> </u>		
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Corporate Filing Menu

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PAGE 02/03

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LLEDY

FOR
FLORIDA LIMITED LIABILITY COMPANY E 🕿
ARTICIEL Name
The name of the Limited Liability Company is:
Daver communications LLC
The mailing address and ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:
1100 NE 45th St Suite # 171
Oahland Park Florida 33334
11 F 10/100 33334
A DVM CV
ARTICLE III - Registered Agent, Registered Office:
The name and the Florida street address of the registered agent are: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
with an active Florida registration.)
Hingelina Marie Andreoli
1100 NE WETH OF G
1100 NE 45 5 ST SUITE# 171
OAKLAND PARK FLORIDA 33334
ARTICLE IV
The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)
company: (MGK of AMBK)
Angelina Marie Andreoli AMBR

Required Signatures:

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

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

Typed or printed name of simes

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..

ed Agent's Signature (REQUIRED)

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