

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000240374 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Tot				5.	2020	
To:	Division of Co.	rporations		SEC	20	
	Fax Number	: (850)617-6381		RET NHZ	JUL	
From:				SS	23	<u> </u>
		: LAZARUS CORPORATE FILING SERVE : I20000000019	ICE, INC.	n -	Aři	m
	Phone	: (305)552-5973				\Box
	Fax Number	: (305)675-5944		DRIDA	10: 22	
**Enter anr	the email addres: wal report maili	s for this business entity to be .ngs. Enter only one email addres	used for f s please.*	uture *		
Ema	il Address:					
					22	
	ELODI		······································		20	$\overline{\mathcal{X}}$
	rLORII	DA LIMITED LIABILITY CO	J.		Ľ	(T)
	D	G PRODUCTIONS LLC		· · ·	\sim	C.

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu Corporate Filing Menu

Help

T. BURCH JUL 2 4 2020

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE 1 - Name: The name of the Limited Liability Company is: DG Productions LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

170th ct, Mismi FL. 33196 9460 SW

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (The Linuted Liability Company cannot serve as us own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

Daniel EDU	ARPO	GUEDEZ		
9460	SW	170	CT.	
Miam	ni F	L 331	196	

ARTICLE IV

The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)



Required Signatures:

Signature of a member or an authorized representative of a member

77

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. 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.

Guedez AVII

Typed or printed name of signee

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)