Electronic Filing Cover Sheet

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.

(((H20000290366 3)))



H200002903663ABC

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

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FL PATEL LAW PLLC

Account Number : 120170000097 Phone : (727)279-5037

Fax Number : (727)888-1294

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Flournoyjames82@gmail.com

FLORIDA LIMITED LIABILITY CO.

Da'or Fashions, LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

17278881294

ARTICLES OF ORGANIZATION

FOR

Da'or Fashions, LLC

A

Florida Limited Liability Company

FILED
2020 AUG 21 PM 4: 0:

ARTICLE I.

Name

The name of the Limited Liability Company is: Da'or Fashions, LLC (the Company).

ARTICLE II. Address

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

100 South Ashley Drive Suite 600 Tampa, Florida 33602

ARTICLE III. Registered Agent, Registered office, & Registered Agent's Signature

The name and the Florida Street Address of the Registered Agent are:

FL Patel Law PLLC 360 Central Ave Suite 800 Saint Petersburg, Florida 33701

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.

Hilary Zalla

FL Patel Law PLLC (sign)

ARTICLE IV. Authorized Members and Managers

The Name and Address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	Name and Address
AMBR = Authorized Member MGR = Manager	
MGR	James Flournoy Sr. 100 South Ashley Drive Suite 600 Tampa, Florida 33602

ARTICLE V.

The Effective date shall be the date of filing.

***************************************	Sweffer	(sign)
This document is executed I am aware that any false in	mber or an authorized repress in accordance with section 605 formation submitted in a docum	.0203 (1) (b), Florida Statutes, nent to the Department of State
constitutes a thi	rd degree felony as provided fo James Flournov Sr	
Au	thorized Representative/M	