L21000530345

-	(Requestor's Name)
	(Address)
<u>-</u>	(Address)
	(City/State/Zip/Phone #)
PICK-U	P MAIL MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instruction	s to Filing Officer:
<u></u>	

Office Use Only



300378332303

Incorporating Services, Ltd.

1540 Glenway Drive

Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incser

ORDER FORM

FROM

TO Florida Department of State The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com

Melissa Moreau mmoreau@incserv.com 850.656.7953

RF	กม	FST	DATE	12/21/2021
	vv		~~!	14/41/4041

850-245-6051

PRIORITY Regular Approval

OUR REF_#_(Order_ID#) 984567

ORDER ENTITY DCA.IO LLC

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-	 				
	DEDEN	DM THE		NUTHE	CEDVITEE.
,	 PERFU	RM INC	TOLL:		SERVICES:

DCA.IO LLC (FL)

New LLC filing

NOTES:

\$125.00 Authorized Email address for annual report reminders: fanny@recordsearch.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, December 21, 2021 Page 1 of 1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

DCA.IO LLC			
(Mu	st contain the words "Limited Liab	oility Company, "	'L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and s	treet address of the principal offic	e of the Limited I	Liability Company is:
<u>P</u>	rincipal Office Address:		Mailing Address:
	NIAL BLVD. STE 30 #200	10676	S COLONIAL BLVD. STE 30 #200
10676 COLO!	ATUTE DITAIN OFFE DAMEAN		
FORT MEYE RTICLE III - Register The Limited Liability Conother business entity w	ed Agent, Registered Office, & I mpany cannot serve as its own Re ith an active Florida registration.)	Registered Agent	MEYERS, FL 33913
FORT MEYE ARTICLE III - Register The Limited Liability Conother business entity w	ed Agent, Registered Office, & I mpany cannot serve as its own Re ith an active Florida registration.) street address of the registered ag	Registered Agent gistered Agent. Y	t's Signature: ou must designate an individual or
FORT MEYE ARTICLE III - Register The Limited Liability Counother business entity w	ed Agent, Registered Office, & I mpany cannot serve as its own Re ith an active Florida registration.) street address of the registered ag	Registered Agent gistered Agent. Y	t's Signature: ou must designate an individual or
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FORT MEYE ARTICLE III - Register The Limited Liability Connother business entity w	ed Agent, Registered Office, & I mpany cannot serve as its own Re ith an active Florida registration.) street address of the registered ag REGISTERED AGENT N 155 OFFICE PLAZA D	Registered Agent gistered Agent. Y ent are: SOLUTIONS, IN ame	t's Signature: ou must designate an individual or NC.

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager <u>MGR</u>	JARED VOGT 10676 COLONIAL BLVD. STE 30 #200 FORT MEYERS. FL 33913
(Use attachment if necessary)	
(If an effective date is listed, the date must	the date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days after s not meet the applicable statutory filing requirements, this date will not be listed as timent of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	v.+
This document is	of a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes. by false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.
JARED VO	

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)