

L22000011472

Florida Department of State  
Division of Corporations  
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.

((H22000012225 3)))



H220000122253ABCQ

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 : CORPOLICENSE, INC  
Account Number : I20050000118  
Phone : (305)774-9606  
Fax Number : (305)774-9660

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

Email Address: Yudith\_garcia@hotmail.com

FLORIDA LIMITED LIABILITY CO.  
DR. BOOZE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

2022 JAN 10 AM 11:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2022 JAN 10 PM 1:21

FILED

H220000 12225

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY  
OF  
DR. BOOZE, LLC**

**ARTICLE I - NAME:**

The name of the Limited Liability Company Is:

**DR. BOOZE, LLC**

**ARTICLE II - ADDRESS:**

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

**200 Ocean Lane Dr, Apt PA-1  
Key Biscayne, FL 33149**

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The Registered Agent designated is: **DANIELA-ALEJANDRA OTERO-RODRIGUEZ.**

**DANIELA-ALEJANDRA OTERO-RODRIGUEZ  
200 Ocean Lane Dr, Apt PA-1  
Key Biscayne, FL 33149**

*Daniela A. Otero*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 JAN 10 AM 11:16

FILED

Having been named as registered agent and to accept service of process for the a 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.

H220000 12225

H22000012225

**ARTICLE IV - Management/Member(s):**

The name and address of each Manager or Managing Member is as follows:

<b><u>TITLE:</u></b>	<b><u>NAME AND ADDRESS</u></b>
<b>MGR</b>	<b>DANIELA-ALEJANDRA OTERO-RODRIGUEZ 200 Ocean Lane Dr, Apt PA-1 Key Biscayne, FL 33149</b>
<b>MGER</b>	<b>ROCCO-GIAMPIERO LASALVIA-CALVIELLO 200 Ocean Lane Dr, Apt PA-1 Key Biscayne, FL 33149</b>

  
**DANIELA-ALEJANDRA OTERO-RODRIGUEZ**  
**Manager**

**ARTICLE VI - effective day:      JANUARY 1<sup>ST</sup>, 2022**

(In accordance with section 605.0201, Florida Statutes,  
The execution of this document constitutes an affirmation under  
The penalties of perjury that the facts stated herein are true)

2022 JAN 10 AM 4:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

H22000012225