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Certified Copies	_ Certificates	s of Status
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DUKES TECHNIC	CAL SOLUTIO	NS, LLC	
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			Art of Inc. File
		-	LTD Partnership File
		-	Foreign Corp. File
		-	L.C. File
		-	Fictitious Name File
		-	Trade/Service Mark
		-	Merger File
			Art. of Amend. File
		-	RA Resignation
			Dissolution / Withdrawal
		-	Annual Report / Reinstatement
		-	Cert. Copy
		-	Рьою Сору
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
			Vehicle Search
			Driving Record
Requested by:			UCC 1 or 3 File
Nome	Data	Time	UCC II Search
Name	Date	THUC	UCC 11 Retrieval
Walk-In	Will Pick Up	p	Courier

COVER LETTER

TO: New Filing Section Division of Corporations

SUBJECT: _____ Technical Solutions, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEVE DUKES

Name of Person

Firm/Company

3820 Hayes St

Address

Hollywood, FL 33021

City/State and Zip Code

Stdukes@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Steve_Dukes_____at (____305___)
 389-3886

 Name of Person
 Area Code
 Daytime Telephone Number

Enclosed is a check for the following amount:

□\$125.00 Filing Fee	□\$130.00 Filing Fee &	□\$155.00 Filing Fee &	□\$160.00 Filing Fee.
	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy
			(additional copy is enclosed)

<u>Mailing Address</u> New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Dukes Technical Solutions, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
3820 Hayes St	3820 Hayes St
Hollywood, FL 33021	Hollywood, FL 33021

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

(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.)

The name and the Florida street address of the registered agent are:

•	Name	
820 Hayes St		
Florida street ad	ldress (P.O. Box <u>NOT</u> a	acceptable)
Hollywood	FL	33021

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.,

Steve Dukes Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR	Steve Dukes
	3820 Hayes St
	Hollywood, FL 33021

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

<u>REOUIRED</u> SIGNATURE:

Steve Dukes

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. 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.

Steve Dukes

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)