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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: I20000000088

Date: March 22, 2022	Account#. 120000000088
Name: GREG PINTACUDA	
Reference #:	
Entity Name: DALLAS BELL HLDG LLC	_
✓ Articles of Incorporation/Authorization to Transact Busine	ess
☐ Amendment	
Change of Agent	
Reinstatement	
Conversion	
☐ Merger	
☐ Dissolution/Withdrawal	
☐ Fictitous Name	
Other	
Authorized Amount: \$125 Signature:	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liabili	ity Company is:			
			2022 KFR 22 PM 25	3ც
Dallas Beil HLDG I	LC		31. ac 27.	
(Must con	tain the words "Limited	Liability Com	pany: "L.L.C" or "LLC.") - 17.RY OF-STA	L
ARTICLE II - Address: The mailing address and street a	iddress of the principal o	office of the Li	mited Liability Company is:	
<u>Princi</u>	oal Office Address:		Mailing Address:	
7 Avenue De La Me	:r		7 Avenue De La Mer	
Unit 1003			Unit 1003	
Palm Coast, FL 321	37		Palm Coast, FI. 32137	
(The Limited Liability Company another business entity with an The name and the Florida street	active Florida registratio	on.)	gent. You must designate an individual or	
	Devinder P.S. Bhasir	<u> </u>	 , ,	
		Name		
	7 Avenue De La Mer	r, Unit 1003		
	Florida street addres.	s (P.O. Box <u>N</u>	OT acceptable)	
	Palm Coast	FI.	32137	
	City	State	32137 Zip	
place designated in this certificate further agree to comply with the p	. I hereby accept the apportions of all statutes rebligations of my position of	ointment as regelating to the pas registered a	for the above stated limited liability company at the gistered agent and agree to act in this capacity. It is reper and complete performance of my duties, and agent as provided for in Chapter 605, F.S Signature (REQUIRED)	1
		(CONTINU	ieu)	

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	Devinder P.S. Bhasin
	7 Avenue De La Mer, Unit 1003 Palm Coast, FL 32137
	Carrie County () 2 22 2 1
	
	
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•	
(If an effective date is listed, the date must he date of filing.)	date of filing:
ARTICLE VI: Other provisions, if any.	
This document is ex I am aware that any	Member, Member, member or an authorized representative of a member. Recuted in accordance with section 605.0203 (1) (b), Florida Statutes, false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.
Devinder P.S	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)