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Division of Corporations

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From:

Account Name : COMITER & SINGER, LLP

Account Number : 1200000000085

: (561)626-4742

Fax Number : (561)626-4742

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## FLORIDA LIMITED LIABILITY CO.

**DRFG** Investments, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLE 1 - Name:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:					
DRFG INVESTMENTS, LLC					
(Must contain the words "Limited Lia	ibility Company,	"L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the principal office	ce of the Limited	1 Liability Company is:			
Principal Office Address:		Mailing Address:			
Palm Beach Gardens, FL 33412	Sam	ne			
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.)	egistered Agent.	nt's Signature: You must designate an individus	lor Ale		
The name and the Florida street address of the registered ag	gent are;		CRE	;;; -	
Comiter, Singer, Basem	nan & Braun, LL Name	<u>.P</u>	RETARY O AHASSEE,	. 29	-
3825 PGA Boulevard, 5 Florida street address (		acceptable)	OF STATE	5: 14:49:	
Palm Beach Gardens	FL	33410	A SIL	$\overline{\omega}$	
City	State	Zip			

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

A	ĸ	Т1	( I	F	IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Mem	her
"MGR" = Manager	
MGR	Alciandro G. Tania
MCIN	
	Palm Beach Gardens, FL 33412
MGR	Larissa M. Colon-Bengoa
More	11851 Leeth Court
	Palm Beach Gardens, FL 33412
	TA'S
	SS 25
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	55 5
	PATE -
(Line annohment if magagram)	<b></b>
(Use attachment if necessary)	1
A PATERIOR BY N. C. (1985) and the date of Continue of	han the date of filing: (OPTIONAL)
ARTICLE VI Effective date, if other is	must be specific and cannot be more than five business days prior to or 90 days after
	united be abecute with caution be imple turn tive projucts days brior to or so days after
the date of filing.)	k does not meet the applicable statutory filing requirements, this date will not be listed as
Note: If the date inserted in this older	k does not meet the applicable statutory thing requirements, this date with not be inseed as
the document's effective date on the I	Department of State's records.
ARTICLE VI: Other provisions, if any	
ARTICLE VI. Other provisions, it any	•
REQUIRED SIGNATURE	: 10
<u></u>	1/1
Signat	ture of a member or an authorized representative of a member.
This docume	ent is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware t	hat 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.
<u>Mich</u>	acl S. Singer. Authorized Representative
	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)