# 23000042198

# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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to:

Division of Corporations

Fax Number : (850)617-6381

From

Account Name : MARIA XIMENA MARTINEZ

Account Number : 120220000054 Phone : (786)571-4129 : (786)590-1744 Fax Number

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

Email Address:\_

## FLORIDA LIMITED LIABILITY CO. DOTA GOLD STAR FLORIDA LLC

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

PLEASE FILE WITH ORIGINAL SUBMITION DATE OF 1/17/2023

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## **COVER LETTER**

TO:

**New Filing Section** 

1)	Division of Corporations					
SUBJECT	DOTA GOLD STAR FLORIDA LLC					
	Name of Limited Liability Company					
The enclos	sed Articles of Organization and fee(s) are submitted for filing.					
Please retu	irn all correspondence concerning this matter to the following:					
	MARIA XIMENA MARTINEZ					
	Name of Person					
	MODERN SOLUTIONS GROUP					
	Firn/Company					
	2424 W. BRANDON BLVD #1282					
	Address					
	BRANDON, FL 33511					
	City/State and Zip Code INFO@MODERNSOLUTIONSGROUP.NET					
,	E-mail address: (to be used for future annual report notification)					
For further i	nformation concerning this matter, please call:					
	MARIA XIMENA MARTINEZ at ( 786 ) 571-4129					
	Name of Person Area Code Daytime Telephone Number					
Enclosed is	s a check for the following amount:					
\$125.00 F	Status St					
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of Corporations					
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301					

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	DOTA GOL	D STAR FLORIDA L	LC	_
(Must con	tain the words "Limited	Liability Company,	"L.L.C.," or "LLC.")	_
RTICLE II - Address:				
e mailing address and street a	address of the principal of	office of the Limited	Liability Company is:	
<u>Princip</u>	pal Office Address:		Mailing Address:	
733 W COLONIAL DR			733 W COLONIAL DR	_
ORLANDO	), FL 32804		ORLANDO, FL 32804	_
he Limited Liability Company	y cannot serve as its owr	n Registered Agent.	nt's Signature: You must designate an individual or	
other business entity with an	y cannot serve as its owr active Florida registration	n Registered Agent. on.)	nt's Signature: You must designate an individual or	<del></del>
he Limited Liability Company	y cannot serve as its owr active Florida registration	n Registered Agent. on.)	nt's Signature: You must designate an individual or ILARCIA ACCIA	
he Limited Liability Company other business entity with an	y cannot serve as its owr active Florida registration	n Registered Agent. on.) d agent are:	nt's Signature: You must designate an individual or	
he Limited Liability Company other business entity with an	y cannot serve as its own active Florida registration address of the registere	n Registered Agent. on.) d agent are:	You must designate an individual of SECRE PART OF	
he Limited Liability Company other business entity with an	y cannot serve as its own active Florida registration address of the registere	n Registered Agent. on.)  d agent are:  MARTINEZ  Name	You must designate an individual of SECRE PART OF	
he Limited Liability Company other business entity with an	y cannot serve as its own active Florida registration address of the registere MARIA XIMENA in 2424 W. BRANDO	n Registered Agent. on.)  d agent are:  MARTINEZ  Name	You must designate an individual of SECRE PART OF	
he Limited Liability Company other business entity with an	y cannot serve as its own active Florida registration address of the registere MARIA XIMENA in 2424 W. BRANDO	n Registered Agent. on.) d agent are: MARTINEZ Name N BLVD. #1282	You must designate an individual or SECRE PART OF SECRETARY OF SECRETA	

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)

#### ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:			
"MGR" = Manager				
AMBR	DOTA GOLD STAR INVESTMENTS LLC			
	30 N GOULD ST, STE R			
	SHERIDAN, WY 82801			
MGR	ALBERTO RAFAEL-SABINO			
	733 W COLONIAL DR			
	ORLANDO, FL 32804			
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	AR HE			
(Use attachment if necessary)	-11-11			
(Ose attachment if tiecessary)	[S] & C			
ARTICLE V: Effective date, if other than the date of filing:	OF STATE OPTIONS 4			
If an effective date is listed, the date must be specific and the date of filing.)  Note: If the date inserted in this block does not meet the a	cannot be more than five business days prior to or 90 days after pplicable 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. REAL ESTATE INVESTMENTS				
REQUIRED SIGNATURE:				
ALBERTO.	) RAFAEL-SABINO			
Signature of a member or This document is executed in acc	an authorized representative of a member. ordance with section 605.0203 (1) (b), Florida Statutes. ion submitted in a document to the Department of State			
	RTO RAFAEL- SABINO			

### Filing Fees:

Typed or printed name of signee

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)