2023-02-06 19:42:11 GMT Page: 2 of 4 13053284774 lorida Department of

From: Yanet Avila

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.

(((H23000047457 3)))



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 : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : 120000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

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. DISCOUNT DRY CLEANERS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Discount Dry Cleaners, 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:

	Princip	pal Office	Address:
--	---------	------------	----------

Mailing Address:

9835 SW 72 Street same as Principal Address Miami, FL 33173

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:

Georgina Blanco, PA		
Name		
10261 Sunset Dr., Suite C-101		
Florida street address (P.O. Box NOT acceptable)		

Miami		FL	33173
	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. Thereby 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.,

Georgina Blanco

Registered Agent's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Same and Address:
"MGR" = Manager	
MGR	Liliana Freijo Valdivie 9835 SW 72 Street
	Miami, FL 33173
7,400 7 20 0 20 0	
(Use attachment if necessary)	
-	CEL 1-21/2022
(If an effective date is listed, the date must be spe	of filing: 1/31/2023 (OPTIONAL) edific and cannot be more than five business days prior to or 90 days after
the date of filing.) Note: If the date inserted in this block does not m	neet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Department of	
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	11:1-11-17
REQUIRED SIGNATURE:	<u> </u>
Signature of a me	mber or an authorized representative of a member.
Signature of a me This document is execut I am aware that any false	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State
Signature of a me This document is execut I am aware that any false	niber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes.

Filing Fees:
\$125.00 Filing Fee for Acticles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)