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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : I20170000056 Phone : (954)842-2931 Fax Number : (954)842-2936

\*\*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. BAR DAK, LLC.

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## COVER LETTER

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SUBJECT	BAR DAK.	, LLC.					
3065201	•	Name	of Limited Liab	oility Company		•	
The enclose	ed Anicles of	Organization and fe	e(s) are submitt	ed for filing.			
Please retu	m all correspo	ndence concerning	this matter to th	e following:			
	OMITRII PE	ERFILEV					
			Name	of Person			
	BAR DAK.	LLC.					
			Firm	Company			
	20828 NE 32	2ND AVE					
			Ad	dress			
	AVENTUR	A, FL 33180					
		:00\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	City/State	and Zip Code	-		
-		V@GMAIL.COM  S-mail address: (to b	e used for futur	e annual report notificat	ion)	·	
For futher i		ncerning this matter		,	•		
rot taltifer i	DMITRII PE		954	701-5288			
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	New F Division P.O. B	ng Address Illing Section on of Corporations lox 6327 assee, FL 32314		Street Address New Filing Section U The Centre of Tallah 2415 N. Monroe Street Tallahassee, FL 3236	assee eet, Suite 810	ن ن ن	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Lin	ability Company is:			
DAR DAY III	-			
BAR DAK, LLO (Must	contain the words "Limited	Liability Company	r, "L.L.C" or "LLC.")	
ARTICLE II - Address: The mailing address and str	cet address of the principal o	ffice of the Limite	ed Liability Company is:	
<u>Pri</u>	incipal Office Address:		Mailing Addre	<u> 255</u> :
20828 NE 32NI	) AVE	20	828 NE 32ND <u>AVE</u>	
AVENTURA, F		A	VENTURA, FL 33180	
The name and the Florida's				
The name and the Florida's	treet address of the registered	d agent are:		
	DMITRII PERFILE	<u>v</u>		
		Name		
	20828 NE 32ND AV			
	Florida street addres			
	AVENTURA City	FL	33180 Zip	
	City	State	Zip	
place designated in this certif Surther garee to camply with	ered agent and to accept serv ficate, I hereby accept the app the provisions of all statutes r the obligations of my position	pointment as regist relating to the prop	ered agent and agree to act t per and complete performanc	n this capacity. The of my duties, and a 605, F.S.:
	E	metric Perfile	nature (REQUIRED)	
	Regist	tered Agent's Sign	nature (REQUIRED)	, 6
		(CONTINUEI	))	E3 -9 (7.12: 35
				35

ARTICLE IV-

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

WINDER DR			
"MGR" = Mana	thorized Member ager		
	<b>-</b> 8	DMITRU PERFILEV	
AMBR	<del></del>	20828 NE 32ND AVE	<del></del>
		AVENTURA, FL 33130	
AMBR		ARTEM MAKSIMOV	
		20828 NE 32ND AVE	
		AVENTURA, FL 33180	
	<u> </u>		
			<del></del>
	<del></del>		
Use attachmen	it if necessary)		
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