## Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

3052201440

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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## FLORIDA LIMITED LIABILITY CO. DC SOCIAL MEDIA LLC

Certificate of Status	1
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Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help



ARTICLE I - Name:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
DC social media ILC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
16187 sw 72nd Terr Miami, florida, 33,193
209
ARTICLE III - Registered Agent, Registered Office:  The name and the Florida street address of the registered agent are: (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)
ana Geysi Mirabah Garcia H. 33193 F. 35 16187 Sw 72nd Terr Miami, FL, 33193 F. 35
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)  AND CIEUSI MIRCHA GORCÍO (AMBR)

## Required Signatures:

3052201440

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that 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.

Ana Geysi Mirabal Garcia
Typed or printed name of signce

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 aguse 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 ages, as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)