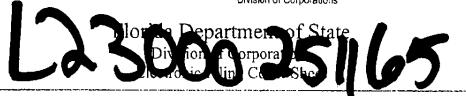
From: Yanet Avila

5/22/23, 12:20 PM

Division of Corporations



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.

(((H23000188047 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

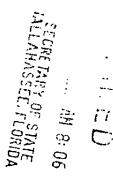
Account Number : I20000000146 : (305)444-4994 Phone Fax Number : (305)328-4774

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 2, LLC**

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



Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF	FORGANIZATION FOR FLOR	DA LIMITED LIABILITY CO	MPANY)
ARTICLE I - Name: The name of the Limited Liabilit	y Company is:	> '	y √ N
Discount Dry Cleane	ors 2, LLC		
	ain the words "Limited Liabili	ty Company, "L.L.C.," or "L	LC.")
ARTICLE II - Address: The mailing address and street address and street address. Princip	ddress of the principal office o		any is: ling Address:
10000 SW 56 Street		10000 SW 56 St.	
H27		#27	
Miami, FL 33165		Miami, FL 33165	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street	cannot serve as its own Regis active Florida registration.)	tered Agent. You must design	
	Georgina Blanco, PA		
	Nam	t	
	10261 Sunset Dr., Suite C-	101	
	Florida street address (P.O	. Box NOT acceptable)	

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..

State

Georgina Blanco
Registered Agent's Signature (REQUIRED)

City

Zip

(CONTINUED)

From: Yanet Avila

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Liliana Freijo Valdivie
111774	10000 SW 56 St, #27
	Miami, FL 33165
	
E V: Effective date, if other than ective date is listed, the date mus	he date of filing:
ective date is listed, the date mus of filing.)	t be specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than ective date is listed, the date must of filing.) The date inserted in this block do ment's effective date on the Depa EVI: Other provisions, if any.	t be specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than ective date is listed, the date must of filing.) The date inserted in this block doment's effective date on the Department of the Department	the specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not rement of State's records.
EV: Effective date, if other than ective date is listed, the date must of filing.) The date inserted in this block doment's effective date on the Department's effective date on the Department of the Department	the specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not rement of State's records.
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EV: Effective date, if other than ective date is listed, the date must of filing.) The date inserted in this block doment's effective date on the Department's effective date on the Department is Signature This document is I am aware that a constitutes a thire	the specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not rement of State's records. Light Trelic Valdivia Mark Trelic Valdivia