Division of Corporations Electronic Filing Cover Sheet

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To:	Division of C	prporations	등 등	2023
	Fax Number	: (850)617-6381	1773	Ē
From:			2151	
	Account Name Account Number	: LAZARUS CORPORATE FILING SERVICE, INC.	が扱べ	$\overline{\omega}$
	Phone	: (305)552-5973	ပ်ာက	72 78
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**E	**Enter the email address for this business entity to be used for Future			
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# FLORIDA LIMITED LIABILITY CO. DCB E-COMMERCE LLC

 Certificate of Status
 1

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 Estimated Charge
 \$130.00

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## ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is: (Must end with the words \*Limited Liability Company,

DCB E-COMMERCE LLC

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability

6560 Nw 7St Apt 106

Miami Fl 33126

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 Plorida registration.)

Castro Barreto, Dianeya

6560 Nw 7St Apt 106

Miami Fl 33126

#### <u>ARTICLE IV-</u>

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

Castro Barreto, Diancya - MGR

6560 Nw 7St Apt 106

Miami Fl 33126

### Required Signatures:

3052201440

Dianeya Castro BarretoSignature 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.

Dianeya Castro Barreto
Typed or printed name of signee

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..

Dianeya Castro Sarreto
Registered Agent's Signature (REQUIRED)

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SECRETARY OF STATE