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Florida Department of State
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**FLORIDA LIMITED LIABILITY CO.
THE DO BROTHERS, LLC**

Certificate of Status	1
Certified Copy	0
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SECRETARY OF
RELIANCE

MS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THE DO BROTHERS, 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:

Principal Office Address:Mailing Address:

4919 NW 50th WAY

4919 NW 50th WAY

TAMARAC, FL 33319

TAMARAC, FL 33319

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:

BENJAMIN DJ. HERNANDEZ BRITO

Name

4919 NW 50th WAY

Florida street address (P.O. Box **NOT** acceptable)

TAMARAC

FL

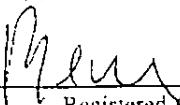
33319

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, 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..

x 
Registered Agent's Signature (REQUIRED)

(CONTINUED)

SECRETARY OF
TALLAHASSEE COUNTY

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

BENJAMIN DJ. HERNANDEZ BRITO

4919 NW 50th WAY

TAMARAC, FL 33319

MGR

VIVIANA MELLA-SANDES

4919 NW 50th WAY

TAMARAC, FL 33319

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 07/20/2023 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

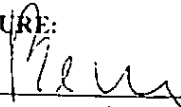
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ARTICLE VI: Other provisions, if any.

ANY AND ALL LAWFUL BUSINESSSES

REQUIRED SIGNATURE:

X


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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

BENJAMIN DJ. HERNANDEZ BRITO

Typed or printed name of signee