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Division of Corporations

Fax Number

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

: (305)675-5944

Account Number : I20000000019
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**Enter the email address for this business entity to be used for future.

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FLORIDA LIMITED LIABILITY CO. DSV RENTALS LLC

Certificate of Status	1
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SECRETARY OF STATE

Electronic Filing Menu

Corporate Filing Menu

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ARTICLE I - Name:

FILED

ARTICLES OF ORGANIZATION FOR SECRETARY OF STATE FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
Doy Prentals LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
120 sw 8th ave Apt 700
Hiam: fl 33130
ARTICLE III - Registered Agent, Registered Office: The name and the Florida street address of the registered agent are: (The Limital Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) Dughes Ency Webs 912 Coche 2 120 Sup 8th ave AP 700 Higgs Florida 33130
ARTICLE IV The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR) Douglas Enoc Velazquez Cortez AMBR

Required Signatures:

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.

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 here'ly 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..

Registered Agent's Signature (REQUIRED)