

## Florida Department of State

Division of Corporations

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Fax Number : (850)617-6381

From:

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**FLORIDA LIMITED LIABILITY CO.  
DIAMONDTREE LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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JUN 26 2024

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**Articles of Organization**  
*for*  
**Florida Limited Liability Company**

**ARTICLE I NAME**

The name of the Limited Liability Company is:

**DIAMONDTREE LLC**

**ARTICLE II PRINCIPAL OFFICE**

The mailing address and street address of the principal office is:

**215 MOSCATO DR., DAVENPORT, FL 33897**

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

**CHIGOZIE G IHEJIRIKA**  
**215 MOSCATO DR., DAVENPORT, FL 33897**

**ARTICLE IV AUTHORIZED REPRESENTATIVE / MANAGER**

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

**CHIGOZIE G IHEJIRIKA, Authorized Member**  
**215 MOSCATO DR., DAVENPORT, FL 33897**

**CHUBA OHAMS, Authorized Member,**  
**215 MOSCATO DR., DAVENPORT, FL 33897**

**June 26, 2024**

*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.*

**s/ CHIGOZIE G IHEJIRIKA**  
**CHIGOZIE G IHEJIRIKA**  
**Registered Agent**

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*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.*

**s/ CHIGOZIE G IHEJIRIKA**

**CHIGOZIE G IHEJIRIKA**

**Authorized Member**

**s/CHUBA OHAMS**

**CHUBA OHAMS**

**Authorized Member**