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COVER LETTER

TO:	New Filing Section				. 5		
	Division of Corpo						
	•						
SURIF	DOLLSA EL T:						
	• • •	Name of Lim	ited Liabi	lity Company		-	
The encl	osed Articles of Or	ganization and fee(s) are	submitte	d for filing.			
Please re	turn all correspond	lence concerning this mat	ter to the	following:			
	SANTIAGO A	VELINO PEREZ FERN.	ANDEZ				
			Name o	f Person	•		— ~
	DOLLSA LLC					_ (1924 A
			Firm/C	ompany		:	
	CALLE ARTIC	TULO 116 DEP 102 COI	. CENTR	O ALCALDIA CUAF	ITEMOC		
			Add	ress		-	<u>ت</u>
	CIUDAD MEX	TCO MEXICO 06000					Pif 4: 07
		Ci	ty/State a	nd Zip Code			
	DOLLSA202@G			=			
	E-n	nail address: (to be used)	or future	annual report notificati	ion)		
for furthe	r information conce	erning this matter, please	call:				
	Santiago Avelin	o Perez Fernande: 52	55	55078094)		_	
	Name c	of Person Ar	ea Code	Daytime Telephon	e Number		
Enclosed	I is a check for the	following amount:					
■ \$125.		□\$130.00 Filing Fee & Certificate of Status	Certil	55.00 Filing Fee & fied Copy nal copy is enclosed)	□\$160.00 Certificat Certified ((additional c	e of Statt Copy	us &
	Mailing /			Street Address			
	New Filir Division	ng Section of Corporations		New Filing Section D The Centre of Tallaha			
	P.O. Box			2415 N. Monroe Stre	et, Suite 810		
	Tallahass	ee, FL 32314		Tallahassee, FL 3230	3		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

DOLLSA LLC				
(Mus	t contain the words "Limited L	iability Company, "L.	L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and st	reet address of the principal of	lice of the Limited Lia	bility Company is:	
<u>Pr</u>	incipal Office Address:		Mailing Address:	
CALLE ARTIC	CULO 116 DEP 102 COL	CALLE	ARTICULO 116 DE	P 102 COL
	ALDIA CUAUHTEMOC		O ALCALDIA CUA	
CIUDAD MEX	ICO MEXICO 06000	CHIDA		
ARTICLE III - Registere			D MEXICO MEXICO Signature:	2 00000
(The Limited Liability Con another business entity wit	d Agent, Registered Office, & appany cannot serve as its own than active Florida registration street address of the registered	& Registered Agent's Registered Agent, You L.)	Signature:	
(The Limited Liability Con another business entity wit	d Agent, Registered Office, & npany cannot serve as its own than active Florida registration	& Registered Agent's Registered Agent, You i.) agent are: 407-61	Signature: must designate an in	
(The Limited Liability Con another business entity wit	d Agent, Registered Office, & npany cannot serve as its own that an active Florida registration at the registered	& Registered Agent's Registered Agent, You i.) agent are:	Signature: must designate an in	
(The Limited Liability Con another business entity wit	d Agent, Registered Office, & npany cannot serve as its own that an active Florida registration at the registered	Registered Agent's Registered Agent. You i.) agent are: 407-61	Signature: must designate an in	
(The Limited Liability Con another business entity wit	d Agent, Registered Office, & npany cannot serve as its own than active Florida registration street address of the registered ANA ALCIVAR	Registered Agent's Registered Agent. You i.) agent are: 407-61	Signature: must designate an in 67011	
(The Limited Liability Con another business entity wit	d Agent, Registered Office, & npany cannot serve as its own than active Florida registration street address of the registered ANA ALCIVAR	& Registered Agent's Registered Agent, You i.) agent are: 407-61 Name	Signature: must designate an in 67011	

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 proyided for in Chapter 605. F.S..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
_	CASTIACCAAVII IMO DED EZ TEDATAMINEZ
MGR	SANTIAGO AVELINO PEREZ FERNANDEZ CALLE ARTICULO 116 DEP 102 COL CENTRO
	ALCALDIA CUAUHTEMOC CIUDAD MEXICO 06000
	
	<u> </u>
	77
(Use attachment if necessary)	
RTICLE V: Effective date, if other than the	ne date of filing: 07/29/2024 (OPTIONAL)
an effective date is listed, the date must	be specific and cannot be more than five business days prior to or 90 days after
e date of filing.)	
	s not meet the applicable statutory filing requirements, this date will not be listed as
e document's effective date on the Depar	tment of State's records.
RTICLE VI: Other provisions, if any,	
UY AND SALES HOME PROPERTIES	COMMERCIAL AND RESIDENCIAL
REQUIRED SIGNATURE:	
ALVERED SIGNATURE.	o a Alalian Division de
<u>zani</u>	icus Nelino Ferez Fernandez
	of a member or an authorized representative of a member.
	executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that an	ry false information submitted in a document to the Department of State

SANTIAGO AVELINO PEREZ FERNANDEZ

constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)