

L24000363063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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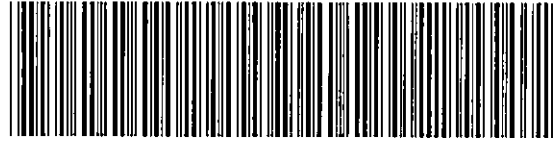
Certificates of Status _____

Special Instructions to Filing Officer.

Honoring July 26th, 2024
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SECRETARY OF STATE
TALLAHASSEE, FL

**ARTICLES OF ORGANIZATION
OF
DIJOCA LLC**

ARTICLE I – NAME

The name of the limited liability company is Dijoca LLC, ("company").

ARTICLE II – ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:
1010 Bella Vista Blvd. #110
St. Augustine, Florida 32084

Mailing Address:
1010 Bella Vista Blvd. #110
St. Augustine, Florida 32084

SECRETARY OF STATE
TALLAHASSEE, FL

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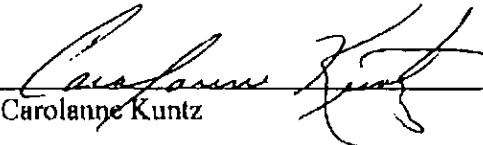
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**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

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

Carolanne Kuntz
1010 Bella Vista Blvd. #110
St. Augustine, Florida 32084

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.



Carolanne Kuntz

ARTICLE IV - MANAGERS OR MEMBERS

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

Title:
"MGR" = Manager

Name and Address:

"AMBR" = Authorized Member

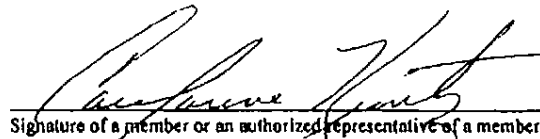
MGR

Carolanne Kuntz
1010 Bella Vista Blvd #110
St. Augustine, Florida 32084

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be July 19, 2024.

REQUIRED SIGNATURE:


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.

Carolanne Kuntz
Typed or printed name of signee

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TALLAHASSEE, FL

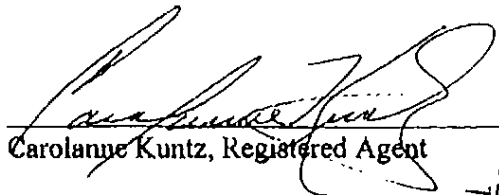
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY Dijoca LLC, SUBMITS THE
FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND
REGISTERED AGENT IN THE STATE OF FLORIDA:

1. The name of the Limited Liability Company is Dijoca LLC.
2. The name and the Florida street address of the registered agent and office are:
Carolanne Kuntz
1010 Bella Vista Blvd. #110,
St. Augustine, Florida 32084

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, Florida Statutes.

Dated this 19 day of July, 2024.



Carolanne Kuntz, Registered Agent

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TALLAHASSEE, FL