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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

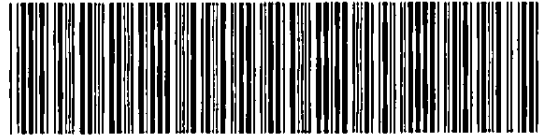
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**CORPORATE  
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1. DRF INVESTMENTS, LLC  
(CORPORATE NAME AND DOCUMENT #)

2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

SPECIAL INSTRUCTIONS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**DRF INVESTMENTS, LLC**

**ARTICLE II - Address:**

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

**Principal Office Address:**

**1835 NW 141 AVENUE**

**PEMBROKE PINES, FL 33028**

**Mailing Address:**

**1835 NW 141 AVENUE**

**PEMBROKE PINES, FL 33028**

SECRETARY OF STATE  
TALLAHASSEE, FL

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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:

**ARTURO MORALES ANAYA**

**1835 NW 141 AVENUE**

**PEMBROKE PINES, FL 33028**

*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/ARTURO MORALES ANAYA*

\_\_\_\_\_  
Registered Agent's Signature

(CONTINUED)

**ARTICLE IV- Members/Managers**

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

**AMBR**

**ALEJANDRO E. DEL RIO DIAZ**  
AV LOMAS JAZMIN 53  
BALCONES DE LA HERRADURA  
HUIXQUILUCAN, MEXICO 52785

**AMBR**

**ANA J. FERNANDEZ SUAREZ**  
AV LOMAS JAZMIN 53  
BALCONES DE LA HERRADURA  
HUIXQUILUCAN, MEXICO 52785

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DEPARTMENT OF STATE  
TALLAHASSEE, FL

**ARTICLE V: EFFECTIVE DATE**

The effective date of this filing is January 1, 2025.

REQUIRED SIGNATURE:

**/S/ ALEJANDRO E DEL RIO DIAZ**

**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.

**ALEJANDRO EDUARDO DEL RIO DIAZ, AMBR**

**Typed or printed name of signee**