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To:
Division of Corporations
Fax Number : (850) 922-4003

From:
Account Name : QUARLES & BRADY LLP
Account Number : I20000000067
Phone : (941) 262-5959
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SECRETARY OF STATE
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LIMITED LIABILITY COMPANY

DMSS LLC

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***Articles of Organization
Of
DMSS LLC***

The undersigned, being authorized to execute and file these Articles, hereby certifies as follows:

ARTICLE I

NAME

The name of the limited liability company shall be DMSS LLC

ARTICLE II

ADDRESS OF PRINCIPAL PLACE OF BUSINESS

The mailing address and street address of the principal office of this limited liability company shall be 4501 Tamiami Trail North, Suite 300, Naples, Florida 34103.

ARTICLE III

MANAGEMENT

This limited liability company shall be managed by the members and shall be a member-managed company.

ARTICLE IV

**DESIGNATION OF REGISTERED OFFICE AND
REGISTERED AGENT**

The name of the initial registered agent of the limited liability company is NAPLES-LAWDOCK, INC., and the address of the office of the registered agent is c/o Quarles & Brady LLP, 4501 Tamiami Trail North, Suite 300, Naples, Florida 34103.

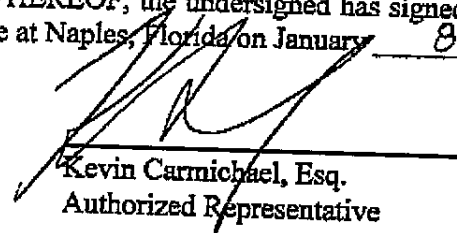
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Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in these Articles, the undersigned hereby accepts the appointment as registered agent and agrees to act in that capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided in Section 608.415, Florida Statutes.

NAPLES-LAWDOCK, INC., Registered Agent

By: KIMBERLY LEACH JOHNSON,
Secretary

IN WITNESS WHEREOF, the undersigned has signed these Articles of Organization as authorized representative at Naples, Florida on January 8, 2001.


Kevin Carmichael, Esq.
Authorized RepresentativeFILED
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In accordance with § 608.408(3), Florida Statutes, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

STATE OF FLORIDA

COUNTY OF COLLIER

The foregoing instrument was sworn to and acknowledged before me this 8th day of January, 2001, by KIMBERLY LEACH JOHNSON, Secretary of Naples-Lawdock, Inc., Registered Agent for and on behalf of DMSS LLC, a limited liability company, who ☐ is personally known to me or ☐ who produced a driver's license as identification.


Name:

Notary Public

My Commission Expires:

(SEAL)

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