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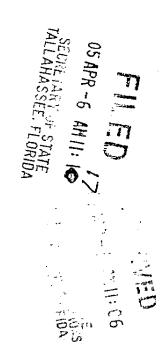
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STATE OF THE STATE OFFICE USE ONLY (DOCUMENT #) LAZARUS CORPORATE FILING SERVICE 3320 S.W. 87 AVENUE MIAMI, FLORIDA (305)552-5973 OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): 2. (Corporation Name) (Document #) 3. (Corporation Name) (Document #) (Corporation Nama) (Document #) Pick up time 1.00 Certified Copyr Walk in Mail out Will wait Certificate of Status Photocopy NEW FILINGS AMENDMENTS **Profit** Amendment Resignation of R.A., Officer/Director NonProfit Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement

Trademark

Examiner's Initials

Other

CR2E031(9/92)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COM

ARTICLE I - Name:

The name of the Limited Liability Company is:

DMSP Holdings, LLC

ARTICLE II - Address:

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

Mailing Address:
DMSP Holdings
7281 SW 134 Terr
Pinecrest, Florida 33156

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Doannis Pablos	
Nai	me
7281 SW 134 Terr	
Florida street	address (P.O. Box NOT acceptable)
Pinecrest, Florida 33156	FL
City, Stat	te, and Zip

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 608, F.S.

Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Doannis Pablos 7281 SW 134 Terr
	Pinecrest, Florida 33156
MGR	Michele E. Pablos
	7281 SW 134 Terr
	Pinecrest, Florida 33156
(Use attachment if necessary)	
NOTE: An additional article must	t be added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a memb	er or an authorized representative of a member.
	ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury herein are true.)
Doannis Pabios	
T	yped 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)