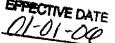
(Re	equestor's Name)			
(Ac	ldress)			
	idress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nam	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
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Office Use Only



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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	CT. D.C. Investors, LLC	
	(Name of Limited Liability Company)	
The enc	closed Articles of Organization and fee(s) are submitted for filing.	
Please r	return all correspondence concerning this matter to the following:	
-	Christopher J. Curry	
	(Name of Person)	
_	·	
	(Firm/Company)	3 9
_	9200 NW 36th PL Suite B) SE
	(Address)	2 S
	0°CINESVIIIE, 12 321000	o COR
_		
For furt	her information concerning this matter, please call:	ATION
Chr	(Name of Person) at (35a) 332-6611 (Area Code & Daytime Telephone Number)	
Enclose	ed is a check for the following amount:	
□ \$125.	.00 Filing Fee \$\int \text{\$130.00 Filing Fee & } \text{\$\subseteq} \$\subseteq	&
	Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

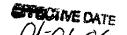
ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
D.C. INVESTORS, LLC (Must end with the words "Limited Liability Company, "Limited	Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9200 NW 310MPL Suite F Gainesville, FL 321006	Same
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	- · · · · · · · · · · · · · · · · · · ·

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 positions are gistered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2



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:	
MG PM	David Kranz PO BOX 2860	
MGRM	Christopher Curry 9200 NN 20th PL SuteB	
	DIVISION OF C 19	3
(Use attachment if necessary)	9 PM 4: 41	ייניס
ARTICLE V: Effective date, if other than the date	te of filing: <u>JAN, AL, 2006</u> (OPTIONAL) pecific and cannot be more than five business days prior	٢
REQUIRED SIGNATURE:		
Signeture of a member of	r an authorized representative of a member	

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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)