

## Florida Department of State

Division of Corporations

Public Access System

Electronic Filing System

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H06000218541 3)))



H060002185413ABC.

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:  
Division of Corporations  
Fax Number : (850) 205-0393

From:  
Account Name : HUBCO  
Account Number : 104662003400  
Phone : (516) 935-3940  
Fax Number : (516) 935-3088

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2006 AUG 31 AM 9:46

**FLORIDA/FOREIGN LIMITED LIABILITY CO.****DKTS Ventures, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

RECEIVED  
06 AUG 31 PM 4:35  
DIVISION OF CORPORATION

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name

The name of the Limited Liability Company is: **DKTS Ventures, LLC**

## ARTICLE II - Address

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

Principal Office Address:Mailing Address:1953 Barber Road1953 Barber RoadSarasota, FL 34240Sarasota, FL 34240

## ARTICLE III - Registered Agent, Registered Office &amp; Registered Agent's Signature

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

**Daniel Binns**Name1953 Barber Road(P.O. Box or Mail Drop Box NOT Acceptable)Sarasota, FL 34240(City / State / Zip)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2006 AUG 31 AM 9:46

*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 - Daniel Binns*

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:****MGR****Daniel Binns - 1953 Barber Road, Sarasota, FL 34240**

(Use attachment if necessary)

**REQUIRED SIGNATURE:**  
Signature of a member or 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. )

**Daniel Binns**

Typed or printed name of signer

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2006 AUG 31 AM 9:46