

Division of Corporations

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**WD8000062585**

Florida Department of State

Division of Corporations  
Public Access System

## Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : NATIONAL REGISTERED AGENTS, INC.  
Account Number : I20030000062  
Phone : (609) 716-0300  
Fax Number : (609) 716-082008 JUN 26 AM 8:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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08 JUN 26 PM 2:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**FLORIDA/FOREIGN LIMITED LIABILITY CO.****DP EM Nautical LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

DP EM Nautical LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

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

**Principal Office Address:**5660 LaGorce DriveMiami Beach, Florida 33140**Mailing Address:**5660 LaGorce DriveMiami Beach, Florida 33140**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

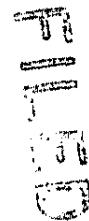
Eric Morillo

Name

5660 LaGorce DriveFlorida street address (P.O. Box NOT acceptable)Miami BeachFL 33140

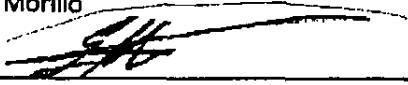
City, State, and Zip

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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 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.*

Eric Morillo

By: 

Registered Agent's Signature (REQUIRED)

(CONTINUED)  
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**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:**MGRMEric Morillo5660 LaGorce DriveMiami Beach, Florida 33140


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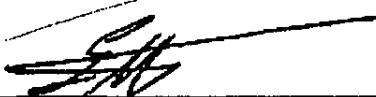
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(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)**  
**(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)**

**REQUIRED SIGNATURE:**

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.)

Eric Morillo

Typed or printed name of signee

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 TALLAHASSEE, FLORIDA

**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)**

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