

Division of Corporations

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# LO9000016788

Florida Department of State  
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To: Division of Corporations  
 Fax Number : (850) 617-6383

From: Account Name : COHEN, CHASE, HOFFMAN & SCHIMMEL, P.A.  
 Account Number : 102450002676  
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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

DCards, LLC

Certificate of Status	0
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EXAMINER

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ARTICLES OF ORGANIZATION

OF

DCards, LLC

ARTICLE I - NAME

The name of this Limited Liability Company is DCards, LLC.

ARTICLE II - EXISTENCE

The existence of this Company shall commence on the day of filing these Articles of Organization. The duration of the Company shall be perpetual.

ARTICLE III - PRINCIPAL OFFICE

The Company's principal office shall initially be located at 1002 W. University Avenue, Gainesville, Florida 32601. The Company's mailing address shall initially be located at the same address.

ARTICLE IV - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Company and the name of the initial registered agent of this Company at such address are as follows:

<u>REGISTERED AGENT</u>	<u>STREET ADDRESS OF REGISTERED OFFICE</u>
Daniel Schwimmer	1002 W. University Avenue Gainesville, Florida 32601

ARTICLE V - MANAGEMENT

The Company shall be a manager managed limited liability company. The initial managers are:

<u>MANAGER</u>	<u>ADDRESS</u>
Daniel Schwimmer	1002 W. University Avenue Gainesville, Florida 32601

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Jason Spiewak

2429 San Miguel Avenue  
Tallahassee, Florida 32304

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 SCHWIMMER, Member

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, I hereby accept the appointment as registered agent and agree to act in that 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 Florida Statutes, Chapter 608.

  
\_\_\_\_\_  
DANIEL SCHWIMMER, Registered Agent

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