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EXAMINER

COVER LETTER

TO: Registration S Division of Co			•
SUBJECT: DTS S	South-Manhattan K	raft LLC	
	Name of Limited	Liability Company	
The enclosed Articles of	Organization and fee(s) are sub	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
Darryl En	nbrey		
		ame of Person	,
DTS Sout	th-Manhattan Kraft	LLC	
	F)	rm/Company	
1681 Suc	cess Drive		
		Address	
Cantonmer	it, FL 32533		
	·	tate and Zip Code	201 SI SI TAI
darryl.embre	ey@dtsnet.us	future annual report notification)	
For further information	concerning this matter, please ca	•	2011 MAR I I AM I SECRETARY OF S TALLAHASSEE, FL
roi further information (concerning this matter, please ca	III:	SEE
Julia Crary	a	, 850 ₎ 937-8566	one Number RAT
Name o	of Person	Area Code & Daytime Telepho	one Number
Enclosed is a check fo	r the following amount:		→
] 	N1 CO OO EUR
\$125.00 Filing Fee ∠	\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ	ele

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DTS South-Manhattan Kraft LLC

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

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

1681 Success Drive	1681 Success Drive		
Cantonment, FL 32533	Cantonment, FL 32533		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the Darryl Embrey	istered Agent. You must designate an individual o	or another	13767
Namo	e .		•
4920 Pineview F	Ridge Road		1,45.7 fg.
Florida street ac	ddress (P.O. Box NOT acceptable)		
Pace	្រ 32571 💆	n an	•
City, S	State, 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 (REQUIRED)

(CONTINUED)

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	Darryl Embrey/Diversified Technology Solutions, Inc. 1681 Success Drive Cantonment, FL 32533
MGRM	William Dean/Manhattan Kraft Construction 3520 Kraft Road Naples, FL 34105
	
an effective date is listed, the date n	nan the date of filing: (OPTIONAL) nust be specific and cannot be more than five business days prior
or 90 days after the date of filing.) REQUIRED SIGNATURE:	74. SI 20
•	nember or an authorized representative of a member of a member of a member of a member of the state of the st
constitutes an affirmation I am aware that any fals	ion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are rue. e information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.)

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)

Typed or printed name of signee