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Office Use Only

COVER LETTER

| TO: Registration S Division of Co | | | | | | |
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| SUBJECT: Prop | erty Manager | nent DM | l, L.L.C | | | |
| SUBJECT: | | ed Liability Comp | | 7.00 | | NEW TO WELL |
| The enclosed Articles o | f Organization and fee(s) are | submitted for filing | g | SECRETA | | T |
| Please return all corresp | ondence concerning this matt | er to the following | ţ: | \$2.50 2.50 2.50 2.50 2.50 2.50 2.50 2.50 | | 1 |
| Dayna | Martella | | | | 2 | |
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| Royal F | Palm Beach 3 | 3411 | | | | |
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| | E-mail address: (to be used | for future annual rep | ort notification) | | - 1 | र र रेडक्पूरक् |
| For further information | concerning this matter, please | e call: | | | | |
| Dayna Ma | rtella | 561 | 202-47 | 746 | | |
| | of Person | Area Cod | e & Daytime Tele | phone Number | ŧ . | ″ : <u>-₹,</u> : ⊤ %± |
| Enclosed is a check f | or the following amount: | | | | | |
| ■\$125.00 Filing Fee | □\$130.00 Filing Fee & Certificate of Status | □\$155.00 Fili Certified Co (additional co | - | \$160.00 Filing Fe Certificate of Stat Certified Copy (additional copy is en | us & | |
| | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Registra Division Clifton 2661 Ex | Courier Address tion Section to of Corporations Building secutive Center C ssee, FL 32301 | s | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | - | |
|--|--|-------------------------------|
| The name of the Limited Liability Company is: | A | <u>e</u> 2 |
| | 2 | 윤 드 - |
| Property Management DM, L.L.C | | |
| (Must end with the words "Limited Liabil | lity Company, "L.L.C.," or "LLC.") | - |
| | | |
| ARTICLE II - Address: | | |
| The mailing address and street address of the pr | incipal office of the Limited Liability | Company is: |
| Principal Office Address: | Mailing Address: | |
| 10299 Southern Boulevard PO Box 1195 | 10299 Southern Boulevard PO Box 1195 | |
| Royal Palm Beach, Florida 33411 | Royal Palm Beach, Florida | |
| | | |
| (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the r Parts-Irwin DOUNE Name | | another |
| 1105 Duncan Circle #204 | <u> </u> | • |
| Florida street add | dress (P.O. Box <u>NOT</u> acceptable) | |
| Palr | n Beach Gardens, Flori રામીશ | |
| City, Sta | ate, and Zip | |
| Having been named as registered agent and to liability company at the place designated in t registered agent and agree to act in this capac all statutes relating to the proper and complet | this certificate, I hereby accept the appoints. I further agree to comply with the | pointment as provisions of |

(CONTINUED)

and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

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:

| "MGRM" = Managing Memb | er |
|---|--|
| Mgr | Dayna Martella |
| | 10299 Southern Boulevard PO Box 1195 |
| | Royal Palm Beach, Florida 33411 |
| Managing Memeber | Darla Irwin |
| | 1105 Duncan Circle #204 |
| | Palm Beach Gardens, Florida 33418 |
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| (Use attachment if necessary) | |
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| LE V: Effective date, if other ffective date is listed, the date or 90 days after the date of the date. | te must be specific and cannot be more than five busing.) |
| LE V: Effective date, if other ffective date is listed, the date of 1 or 90 days after the date of 1 REQUIRED SIGNATURE: Signature of (In accordance with seconstitutes an affirmation of 1 am aware that any factors.) | ite must be specific and cannot be more than five busing.) |
| LE V: Effective date, if other ffective date is listed, the date of 1 or 90 days after the date of 1 REQUIRED SIGNATURE: Signature of (In accordance with seconstitutes an affirmation of 1 am aware that any factors.) | a number or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true. Ise information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.) |

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)