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Florida Department of State  
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To:

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

From:

Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.  
DZNTZ Services LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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EXAMINER

H12000148389 3

**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

DZNTZ SERVICES LLC

**ARTICLE II ADDRESS**

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

1280 MAYPORT LANDING DRIVE  
ATLANTIC BEACH, FLORIDA 32233

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

DANIEL FULTS  
1280 MAYPORT LANDING DRIVE  
ATLANTIC BEACH, FLORIDA 32233

Having been named as registered agent 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.

  
X DANIEL FULTS / Registered Agent's signature

H12000148389 3

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PAGE 2 DZNTZ SERVICES LLC

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS**

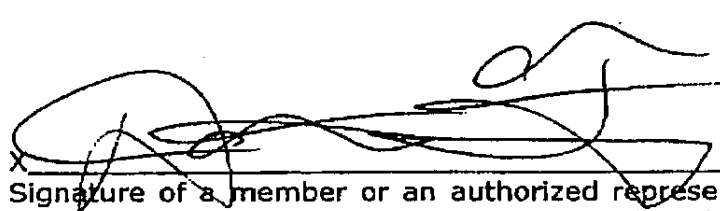
MANAGING MEMBER

DANIEL FULTS

1280 MAYPORT LANDING DRIVE

ATLANTIC BEACH, FLORIDA 32233

.....

A handwritten signature in black ink, appearing to read 'Daniel Fults', is written over a horizontal line. The signature is stylized with loops and flourishes.

X  
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.

DANIEL FULTS

H12000148389 3