

01/29/2014

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305-281-1098

CLARA GIRALDO P.A.

Division of Corporations

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**Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : CLARA GIRALDO, P.A.
Account Number : I19990000017
Phone : (305) 485-9300
Fax Number : (305) 485-1098

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

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**FLORIDA LIMITED LIABILITY CO.
DTS PROTECTION, LLC.**

Certificate of Status	1
Certified Copy	0
Page Count	04
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EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY
OF

DTS PROTECTION, LLC.

ARTICLE I - NAME

The name of the Limited Liability Company is:

DTS PROTECTION, LLC.

ARTICLE II - ADDRESS

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

**8249 NW 36 ST SUITE # 110
DORAL, FL. 33166**

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:

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

JUAN PABLO BEDOYA

8249 NW 36 ST SUITE # 110

Florida street address (P.O. BOX NOT acceptable)

DORAL, FL. 33166

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 605, F.S.


REGISTERED AGENT'S SIGNATURE**ARTICLE IV- MANAGEMENT**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

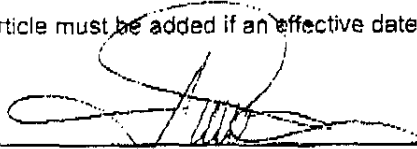
JUAN PABLO BEDOYA
8249 NW 36 ST SUITE # 110
DORAL, FL. 33166

MANAGER

JOSE RUBIO
8249 NW 36 ST SUITE # 110
DORAL, FL. 33166

MANAGER

(An additional article must be added if an effective date is requested)



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.)

JUAN PABLO BEDOYA
Typed or printed name of signee

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