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JUL - 1 2014

T. HAMPTON

COVER LETTER

1 G: Registration Section Division of Corporations
SUBJECT: DGH INterNational LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Christopher M. Heutwell Name of Person
DGH International LLC Firm/Company
2297 Royal Lane
Naples Florida 34112 City/State and Zip Code CM Hatwell & GMail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Christopher Hatwell at (239) 784 - 5649 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\Bigsim \frac{\text{\$125.00 Filing Fee}}{\text{\$130.00 Filing Fee}} \Bigsim \frac{\text{\$\$155.00 Filing Fee}}{\text{\$\$Certificate of Status}} \Bigsim \frac{\text{\$\$155.00 Filing Fee}}{\text{\$\$Certified Copy}} \Bigsim \frac{\text{\$\$Certified Copy}}{\text{\$\$(additional copy is enclosed)}} \Bigsim \frac{\text{\$\$Certified Copy}}{\text{\$\$(additional copy is enclosed)}} \Bigsim \frac{\text{\$\$\$Certified Copy}}{\text{\$\$(additional copy is enclosed)}} \Bigsim \frac{\text{\$\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$\$\$} \Bigsim \text{\$\$\$\$\$} \Bigsim \text{\$\$\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$} \Bigsim \text{\$\$\$\$} \Bigsim \text{\$\$\$} \Bigsim \text{\$\$} \Bigsim \text{\$\$} \Bigsim \text{\$\$} \Bigsim \text{\$\$} \Bigsim \Bigsim \text{\$\$} \Bigsim \Bigsim \text{\$\$} \Bigsim \Bigs
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liabil	ity Company is:					
DGH IV	Ternational with the words "Limited L	L <i>l</i> iability Comp	pany, "L.L.C.,"	or "LLC.")		
ARTICLE II - Address: The mailing address and street	address of the principal offi	ce of the Lim	nited Liability C	Company is:		
Principal Office Address:		Mailing Ad	ldress:		·	
2297 RoyA NAPIES F1 34112	1 Lme		2297 NAPTES 34,	Royal Fl 112	LANE	
ARTICLE III - Registered A (The Limited Liability Compar another business entity with an	y cannot serve as its own R	egistered Age	Agent's Signat ent. You must d	ure: lesignate an in	dividual or	
The name and the Florida stree	·	-				
	Christopher Name 297 Royal)tatu	sell_			
	Name					
_22	297 Royal	Lan	<u>e</u>			
Florid	a street address (P.O. Box <u>N</u>	VOT acceptal	ble)			
	raples City	FL	34112	_		
	City		Zip			
capacity. I further agree to c	certificate, I hereby accept to comply with the provisions of iar with and accept the oblig	the appointme call statutes regations of my r 605, F.S.	ent as registered elating to the pr position as regi	l agent and agi oper and comp	ree to act in olete perforn	this nance
				Ā	s =	
	(CONTINUE	D)			ECRE .	*****
	Page 1 of 2			ĄŠE	3	A STATE OF THE STA

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Christophern Hatwell 2297 Royal Lone
AMBR	Rosie K. Hutwell 2297 Royal Lone
	NAMES F1 34/1/2
fective date is listed, the date must b	date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days.
EV: Effective date, if other than the fective date is listed, the date must be of filing.)	date of filing: (OPTIONAL) se specific and cannot be more than five business days prior to or 90 days.
LE V: Effective date, if other than the	date of filing: (OPTIONAL) the specific and cannot be more than five business days prior to or 90 days And
E V: Effective date, if other than the fective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	e specific and cannot be more than five business days prior to or 90 days prior to or
E V: Effective date, if other than the fective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with section constitutes an affirmation I am aware that any false)	member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. information submitted in a document to the Department of State
E V: Effective date, if other than the fective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of (In accordance with section constitutes an affirmation I am aware that any false constitutes a third degree	member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.) 11.5 to pher M. Her tweel
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