

L14000126563

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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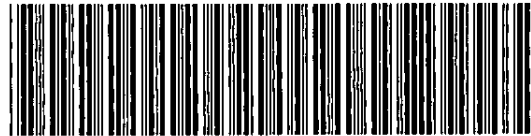
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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14 AUG 12 PM 1:31

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 13 2014

T. BROWN

**CT Corporation System**

515 E. Park Ave., Tallahassee, FL, 32301

850-222-1092

**DAMES POINT MANAGEMENT, LLC**

**Thank you!**

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
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8/12/2014

**ST**

Order#:  
**9237985**

Ref#: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
OF  
DAMES POINT MANAGEMENT, LLC**

**FILED**  
14 AUG 12 PM 1:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is DAMES POINT MANAGEMENT, LLC (the "Company").

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Company is 333 Avenue of the Americas, Suite 4500, Miami, Florida 33131.

**ARTICLE III - Registered Agent:**

The street address of the initial registered office of the Company shall be 333 Avenue of the Americas, Suite 4500, Miami, Florida 33131, and the name of the initial registered agent of the Company at that address is Philip D. Tingle.

**ARTICLE IV - Management:**

The Company is be managed by its members.

**ARTICLE V - Purpose:**

The business of the Company shall be to engage in any lawful act or activity permitted to a limited liability company under the laws of Florida.

**ARTICLE VI - Amendment:**

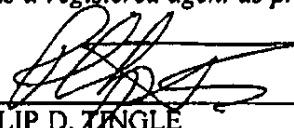
These Articles of Organization may be altered, amended or repealed by the members of the Company in accordance with Florida law.

**IN WITNESS WHEREOF**, the undersigned, pursuant to laws of the State of Florida, has executed these Articles of Organization as of August 12, 2014

  
Philip D. Tingle, Authorized Signatory

## STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

*Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent as provided for in Chapter 605, F.S.*

  
\_\_\_\_\_  
PHILIP D. TINGLE