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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BOND, SCHOENECK & KING, PLLC

Account Number : I20010000122 Phone : (239)659-3800 Fax Number : (239)659-3812

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

Email Address: akerlek@bsk.com

### FLORIDA LIMITED LIABILITY CO. **DJLS UNIVERSE LLC**

1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NAME AND ADDRESS OF THE
Certificate of Status	0
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# ARTICLES OF ORGANIZATION OF DJLS UNIVERSE LLC

#### **ARTICLE I - NAME**

The name of the limited liability company is DJLS UNIVERSE LLC ("Company").

#### ARTICLE II – ADDRESS

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

Principal Office Address: c/o BOND, SCHOENECK & KING PLLC 4001 TAMIAMI TRAIL N, SUITE 250 NAPLES, FLORIDA 34103

Mailing Address: PMB #106, PO BOX 413005 NAPLES, FL 34101-3005

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

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

ADAM C. KERLEK, ESQ. c/o BOND, SCHOENECK & KING PLLC 4001 TAMIAMI TRAIL N, SUITE 250 NAPLES, FLORIDA 34103

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.

ADAM C. KERLEK, ISQ., Registered Agent

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#### **ARTICLE IV - MANAGERS OR MEMBERS**

The name and address of each person authorized to manage and control the Company:

Title:

Name and Address:

Manager (MGR)

DANIEL J. LEKANDER PMB #106, PO BOX 413005 NAPLES, FL 34101-3005

REQUIRED SIGNATURE:

David I likander

Signature of a member or an authorized representative of a member.

(In accordance with section 605.205(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

DANIEL J. LEKANDER

Typed or printed name of signee

