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COVER LETTER

SUBJECT: Denver Corporate Center DCC 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: Kevin A. Denti, Esquire Name of Person Kevin A. Denti, P.A. Firm/Company 2180 Immokalee Road - Suite #316 Address Naples, Florida 34110 City/State and Zip Code kdenti@dentilaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kevin A. Denti, Esquire 239 260-8111	
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Kevin A. Denti, Esquire 239 260-8111at ()	-
at ()	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□\$125.00 Filing Fee	ż

Mailing Address

New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liabilit Denver Corporate Co					
		d Liability Company, "L	.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street ad					
<u>Principa</u>	al Office Address:		Mailing Address:		
999 Vanderbilt Beac Suite #701 Naples, Florida 3410		Suite #	anderbilt Beach Road 1701 5, Florida 34108		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its ow	m Registered Agent. Yo	s Signature: ou must designate an individual o	to n	.
(The Limited Liability Company	cannot serve as its ow active Florida registrat address of the register	m Registered Agent. Yo ion.) ed agent are:	s Signature: ou must designate an individual o	to n	
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(The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registrat address of the registere Kevin A. Denti, Es 2180 Immokalee R	m Registered Agent. Yo ion.) ed agent are: quire Name	nu must designate an individual o	SECUTIVE AND SECUTIVE AND THE SECUTIVE A	
(The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registrat address of the registere Kevin A. Denti, Es 2180 Immokalee R	m Registered Agent. Yo ion.) ed agent are: quire Name oad - Suite #316	nu must designate an individual o	2421 JUL - 2	

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	DCC 1 Manager, Inc.
	999 Vanderbilt Beach Road - Suite #701 Naples, Florida 34108
	Trapies, Fiorial 34100
	
(Use attachment if necessary)	
RTICLE V: Effective date, if other than the date of an effective date is listed, the date must be specified of filing.)	filing: (OPTIONAL) fic and cannot be more than five business days prior to or 90 days after
RTICLE V: Effective date, if other than the date of an effective date is listed, the date must be specie date of filing.) ote: If the date inserted in this block does not mee	fic and cannot be more than five business days prior to or 90 days after at the applicable statutory filing requirements, this date will not be listed a
RTICLE V: Effective date, if other than the date of an effective date is listed, the date must be speciedate of filing.)	fic and cannot be more than five business days prior to or 90 days after at the applicable statutory filing requirements, this date will not be listed a
ATICLE V: Effective date, if other than the date of an effective date is listed, the date must be specified date of filling.) ote: If the date inserted in this block does not mee document's effective date on the Department of	fic and cannot be more than five business days prior to or 90 days after at the applicable statutory filing requirements, this date will not be listed a
RTICLE V: Effective date, if other than the date of an effective date is listed, the date must be specie date of filing.) ote: If the date inserted in this block does not mee document's effective date on the Department of	fic and cannot be more than five business days prior to or 90 days after et the applicable statutory filing requirements, this date will not be listed a State's records.
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TICLE V: Effective date, if other than the date of an effective date is listed, the date must be specified of filing.) Inte: If the date inserted in this block does not meet document's effective date on the Department of TICLE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a memily this document is executed I am aware that any false in	fic and cannot be more than five business days prior to or 90 days after set the applicable statutory filing requirements, this date will not be listed a State's records.
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The name and address of each person authorized to manage and control the Limited Liability Company:

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)