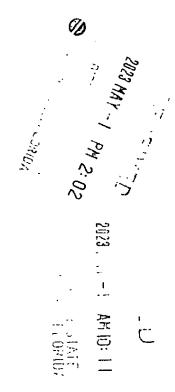
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- 1.	(Requestor	r's Name)			
	(Address)				
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DATE: 05/01/23

NAME: DTL NEW YORK LLC

TYPE OF FILING: ARTICLES

COST: 130.00

RETURN: PLAIN COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

	v Fining Sect ision of Corp						
SUBJECT:	DTL NEW YORK LLC						
30031.01.	Name of Limited Liability Company						
The enclosed	l Articles of (Organization and fee(s) are	submitted for filing.				
Please return	all correspoi	ndence concerning this ma	tter to the following:				
T F	TOMAS (PO BOX (A. GONZALEZ, JI GONZALEZ LAW 934878 TE, FL 33093-4878	Y, P.A.				
S	unbiz@to	omasgonzalezlaw.c	com				
For further inf	ormation con	cerning this matter, please	call:				
Τ	OMAS (GONZALEZ at (83	3) 288-7878				
Enclosed is a	check for the	e following amount:					
□\$125.00 F	iling Fee	■\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Address New Filing Section		Street Address New Filing Section Division					

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

New Filing Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

DTL NEW YORK LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

2701 PONCE DE LEON BLVD	PO BOX 654332
MEZZANINE	MIAMI FL 33265-4332
CORAL GABLES FL 33134	·

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

TOMAS GONZALEZ LAW, P.A. 8181 NW 154TH ST STE 204 MIAMI LAKES, FL 33016

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 (Signature (REQUIRED)

(CONTINUED)

COZOTAL -: AH O: 1

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MBR	DREAM TEAM LAW PLLC
	PO BOX 654332 MIAMI FL 33265-4332
	MIANII FE 33203-4532
P	GUERRERO, JORGE
-3	PO BOX 654332
	MIAMI FL 33265-4332
	
(Use attachment if necessary)	
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f an effective date is listed, the date mu	the date of filing:
e date of filing.)	
	bes not meet the applicable statutory filing requirements, this date will not be listed as
e document's effective date on the Dep	artment of State's records.
RTICLE VI: Other provisions, if any.	
 .	
REQUIRED SIGNATURE:	
Signature	of a member or an authorized representative of a member.
This document	is executed in accordance with section 605.0203 (1) (b). Florida Statutes. any false information submitted in a document to the Department of State
constitutes a thir	d degree felony as provided for in s.817.155, F.S.
	27AN77 A L 177
TOWAS	GONZALEZ Typed or printed name of signee
\$125 00 Filing Foo for Article	Filing Fees: os of Organization and Designation of Registered Agent

\$125.00 Filing Fee for Articles of Organi \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)