

# W5000032969

Florida Department of State  
Division of Corporations  
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MJH

To:  
Division of Corporations  
Fax Number : (850) 205-0383

From:  
Account Name : HUBCO  
Account Number : 104662003400  
Phone : (516) 935-3940  
Fax Number : (516) 935-3088

05 APR -6 PM 1:53

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DIVISION OF CORPORATION

## LIMITED LIABILITY COMPANY

D.D. Resources LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

H0500081774

ARTICLE I - Name

The name of the Limited Liability Company is: **D.D. Resources 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:

165 Montgomery Road

165 Montgomery Road

Altamonte Springs, FL 32714

Altamonte Springs, FL 32714

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

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

Derek Dallas

Name

165 Montgomery Road

(P.O. Box or Mail Drop Box NOT Acceptable)

Altamonte Springs, FL 32714

(City / State / Zip)

*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 608, F.S.*



Registered Agent's Signature - Derek Dallas

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ARTICLE IV - Manager(s) or Managing Member(s):

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The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Derek Dallas- 233 Thomas Drive, Casselberry, FL 32707

MGRM

Darlene F. Dallas- 233 Thomas Drive, Casselberry, FL 32707

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or authorized representative of a member.

( In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. )

Derek Dallas

Typed or printed name of signer

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