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## ORIDA/FOREIGN LIMITED LIABILITY CO.

## Rons Double Eagle Enterprise LLC

Certificate of Status	0
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FAX AUDIT#

## ARTICLES OF ORGANIZATION OF Rons Double Eagle Enterprise LLC

**ARTICLE I** 

NAME

The name of the limited liability company shall be: Rons Double Eagle Enterprise LLC

**ARTICLE II** 

PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 9429 Cypress Lake Dr., Ft. Myers, Florida 33919.

**ARTICLE III** 

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Ronald Hatto, 9429 Cypress Lake Dr., Ft. Sometimes, Florida 33919. Located in the County of Lee.

ARTICLE IV

DURATION

The duration for the limited liability company shall be: 12/31/2047.

ARTICLE V

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Managers and the name and address of the manager of the Limited Liability Company is:

Ronald Hatto, 9429 Cypress Lake Dr., Ft. Myers, Florida 33919

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200, Madison,

Date: October 10, 2007

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(608) 827-5300

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: Rons Double Eagle Enterprise LLC

The name and address of the registered agent and office is Ronald Hatto, 9429 Cypress Lake Dr., Ft. Myers, Florida 33919. Located in the County of Lee.

Having been named as registered agent and to accept service of process for the above stated 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.

Signature:

Ronald Hatto

Date:

SECRETARY OF STATIONS VISION OF CORPORATIONS OF THE STATIONS O