

Aug. 13 2009 2:00PM

No. 7148 p. 28

**L09000078403**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H09000181701 3)))



H090001817013ABC.

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**L. SELLERS**  
**AUG 14 2009**  
**EXAMINER**

To:  
Division of Corporations  
Fax Number : (850) 617-6383

From:  
Account Name : HAILE, SHAW & PFAFFENBERGER, P.A.  
Account Number : 076326003550  
Phone : (561) 627-8100  
Fax Number : (561) 622-7603

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**D2 Capital, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

**RECEIVED**  
**09 AUG 13 11 251**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**FILED**  
**09 AUG 13 4H10:55**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - NAME:** The name of the Limited Liability Company is:

**D2 CAPITAL, LLC**

**ARTICLE II - Address:** The mailing address and the street address of the principal office of the Limited Liability Company is:

1197 North Lake Way, Palm Beach, FL 33480

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:** The name and the Florida street address of the registered agent are:

Drennen L. Whitmire, Jr., Esquire

Name

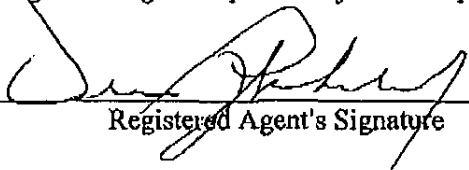
660 U.S. Highway One, Third Floor

Florida street address (P. O. Box NOT acceptable)

North Palm Beach, FL 33408

City State, and 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 provision of all statutes relating to the property 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

**ARTICLE IV - Management (Check box if applicable.)**

☒ The Limited Liability Company is to be managed by one or more managers and is therefor, a manager-managed company.

**ARTICLE V - Effective Date of Existence:** The Effective Date of the Limited Liability Company's existence shall be August 12, 2009.

  
Signature of a member or an 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.)

Drennen L. Whitmire, Jr., Esquire

Typed or printed name of signee

**FILED**  
**09 AUG 13 AM 10:55**  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA