

L120000 79017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

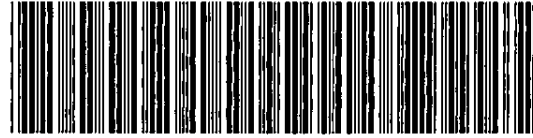
(Business Entity Name)

(Document Number)

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JUN 14 2012

T. HAMPTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Triple Deuce, 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:

Dale S. Wilson
Name of Person

Firm/Company

PO Box 1808
Address

Green Cove Springs, FL 32043
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dale Wilson at (**904**) **284-5618**
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing 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
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION

OF

TRIPLE DEUCE, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

**ARTICLE I
NAME**

The name of the Limited Liability Company is TRIPLE DEUCE, LLC.

**ARTICLE II
NATURE OF BUSINESS**

The general character, purpose, and nature of business to be transacted by this Company is: retail internet services and any other lawful enterprise.

**ARTICLE III
ADDRESS**

The mailing address and street address of the principal office of the company is:
691 Varney Road, Green Cove Springs, Florida 32043

**ARTICLE IV
DURATION**

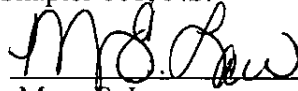
The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE V
REGISTERED OFFICE/AGENT

The name and the Florida street address of the Registered Agent are:

Mary E. Law
691 Varney Road
Green Cove Springs, Florida 32043

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.



Mary E. Law

ARTICLE VI
MANAGER/MANAGING MEMBERS

Title:

Name and Address:

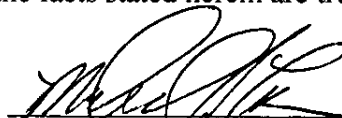
Manager

Michael J. Law
691 Varney Road
Green Cove Springs, FL 32043

Managing Member

Mary E. Law
5142 CR 209 South
Green Cove Springs, FL 32043

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



Michael J. Law
Manager

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