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COVER LETTER

то:	Registration Section Division of Corporations		
SUBJI	ECT: DOUBLE DEE LLC Name of Lie	mited Liability Company	
The en	closed Articles of Organization and fee(s) a	re submitted for filing.	
Please	return all correspondence concerning this n	natter to the following:	
	Diane Stewart	Name of Person	
	DOUBLE DEE LLC	Firm/Company	
	6844 Parisian Way	Address	
_Dc	cubleDLLC2@amail.com	City/State and Zip Code	·
	E-mail address: (to be use ther information concerning this matter, ple	d for future annual report notifica	ntion)
<u>Diane</u>	L. Parks at (561) 703-2529 Area Code Daytime Tel	lephone Number
	of Filing Fee Status 1 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 Adding Registration Section Division of Corporate Clifton Building 2661 Executive Center Tallahassee, FL 3230	ions er Circle

Effective Date 4 114

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

DOUBLE DEE LLC	
	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
he mailing address and street address of the prin	cipal office of the Limited Liability Company is:
rincipal Office Address:	Mailing Address:
6844 Parisian Way	6844 Parisian Way
ARTICLE III - Registered Agent, Registered C	Lake Worth, FL 33467 Office, & Registered Agent's Signature: Is own Registered Agent. You must designate an indiv
ARTICLE III - Registered Agent, Registered C	Lake Worth, FL 33467 Office, & Registered Agent's Signature: ts own Registered Agent. You must designate an indivistration.)
ARTICLE III - Registered Agent, Registered C The Limited Liability Company cannot serve as inother business entity with an active Florida reg	Lake Worth, FL 33467 Office, & Registered Agent's Signature: ts own Registered Agent. You must designate an indivistration.)
ARTICLE III - Registered Agent, Registered Control Company cannot serve as in nother business entity with an active Florida region of the regi	Lake Worth, FL 33467 Office, & Registered Agent's Signature: ts own Registered Agent. You must designate an indivistration.)
ARTICLE III - Registered Agent, Registered Control Company cannot serve as in nother business entity with an active Florida region of the regi	Lake Worth, FL 33467 Office, & Registered Agent's Signature: Is own Registered Agent. You must designate an indivisitration.) istered agent are:
ARTICLE III - Registered Agent, Registered Company cannot serve as in nother business entity with an active Florida region in the name and the Florida street address of the region Diane L. Parks 6778 Versailles Court	Lake Worth, FL 33467 Office, & Registered Agent's Signature: Is own Registered Agent. You must designate an indivisitration.) istered agent are:
ARTICLE III - Registered Agent, Registered Company cannot serve as in nother business entity with an active Florida region in the name and the Florida street address of the region Diane L. Parks 6778 Versailles Court	Lake Worth, FL 33467 Office, & Registered Agent's Signature: Is own Registered Agent. You must designate an indivisitration.) istered agent are:

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's Signature (REOUIRED)

(CONTINUED)

Page 1 of 2

DIVISION OF CORPORATIONS

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Diane L. Parks
	6778 Versailles Court
	Lake Worth, FL 33467
AMBR	Diane Stewart
	6844 Parisian Way
	Lelia Maria La Co-101
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effective date is listed, the date mu	the date of filing: April 1, 2014 (OPTIONAL) st be specific and cannot be more than five business days prior to or 90 days
CLE V: Effective date, if other than	
CLE V: Effective date, if other than effective date is listed, the date mute of filing.)	
CLE V: Effective date, if other than effective date is listed, the date mute of filing.)	the date of filing: April 1, 2014 (OPTIONAL) st be specific and cannot be more than five business days prior to or 90 days Uau A. Harls
CLE V: Effective date, if other than effective date is listed, the date mute of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature	Light J. Harby of a member or an authorized representative of a member.
CLE V: Effective date, if other than effective date is listed, the date muste of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature (In accordance with se	of a member or an authorized representative of a member.
CLE V: Effective date, if other than effective date is listed, the date muste of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature (In accordance with seconstitutes an affirmatic	of a member or an authorized representative of a member. ction 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true.
CLE V: Effective date, if other than effective date is listed, the date mute of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature (In accordance with seconstitutes an affirmation of the constitutes any fall am aware that any fall	of a member or an authorized representative of a member. ction 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. se information submitted in a document to the Department of State
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CLE V: Effective date, if other than effective date is listed, the date muste of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature (In accordance with seconstitutes an affirmation of the constitutes any fallows).	of a member or an authorized representative of a member. ction 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.)

Page 2 of 2

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)