## L15000182331

(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



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SECRETARY OF STATE TALLAHASSEE FLORIS

Office Use Only

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## COVER LETTER

TO:	Registration Section Division of Corporations
SUBJEC	Double H Dairy LLC
BUBBE	Name of Limited Liability Company
The encl	losed Articles of Organization and fee(s) are submitted for filing.
Please re	cturn all correspondence concerning this matter to the following:
	Henricus M Arts
	Name of Person
	:
	Firm/Company
	20489 25th Road
	Address
	Lake City, FL 32024
	City/State and Zip Code
	hm_arts@hotmail.com
	E-mail address: (to be used for future annual report notification)
For furthe	r information concerning this matter, please call:
	Helma Arts 419 910-1095
	Name of Person Area Code Daytime Telephone Number
Enclosed	d is a check for the following amount:
<b>]\$</b> 125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing Section

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")  TICLE II - Address: mailing address and street address of the principal office of the Limited Liability Company is:	
mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Address:	
20489 25th Road 20489 25th Road	
Lake City, FL 32024 Lake City, FL 32024	
her business entity with an active Florida registration.)  name and the Florida street address of the registered agent are:	
	<b>5</b> [
Helma Arts	$\odot$ :
Helma Arts Name	9CT (
Helma Arts Name 20489 25th Road	15 OCT 22
Helma Arts  Name  20489 25th Road  Florida street address (P.O. Box NOT acceptable)	
	OCT 22 PH 12: 26

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 (REQUIRED)

Page 1 of 2

(CONTINUED)

	- Authorized Member	Name and Address:	
"MGR" = 1	Manager	** * **	
AMBR	······································	Henricus M Arts 20489 25th Road	
		Lake City, FL 32024	
ALADD			
AMBR	<del></del>	Lamberta M Arts-Schellekens	
		20489 25th Road Lake City, FL 32024	
<del></del> -	<del></del>		
•	ment if necessary)		
TICLE V: Effect n effective date late of filing.) e: If the date ins	tive date, if other than the date of is listed, the date must be specif	filing: 10-20-2015 (OPTIONAL)  fic and cannot be more than five business days prior to or 90 days a set the applicable statutory filing requirements, this date will not be list State's records.	
TICLE V: Effective date late of filing.)  ig: If the date instruction in the comment's effective of the comment's effective of the comment's of the comment is the comment in the comment	tive date, if other than the date of is listed, the date must be special serted in this block does not mee	fic and cannot be more than five business days prior to or 90 days a et the applicable statutory filing requirements, this date will not be list	
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TICLE V: Effective date late of filing.)  E: If the date instruction in the date instruction of the date instruction.	bive date, if other than the date of is listed, the date must be special serted in this block does not meetive date on the Department of provisions, if any.  D SIGNATURE:  Signature of a memble This document is executed I am aware that any false in constitutes a third degree feel.	the applicable statutory filing requirements, this date will not be list. State's records.  Deer or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes. formation submitted in a document to the Department of State	

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)