

L16000031819

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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CALIFORNIA

2/16/16

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DOUBLE-HOOK UP, 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:

COLIN MYERSON

Name of Person

Firm/Company

P.O. BOX 116

Address

FARGO, GEORGIA 31631

City/State and Zip Code

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

For further information concerning this matter, please call:

CHAD R. CORLEE

912

487-5273

at (_____) _____

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

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

Street Address

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

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16 FEB -4 PM 3:18
TALLAHASSEE, FL 32301

Law Office of Chad R. Corlee

ATTORNEY & COUNSELOR AT LAW
a limited liability company

POST OFFICE BOX 393
172 WEST DAME AVENUE
HOMERVILLE, GA 31634
PHONE (912) 487-5273
FAX (912) 487-2112

February 2, 2016

Florida Department of State
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Sir or Madam:

Please find enclosed 2 LLC's for my client, Colin Myerson. Also enclosed, please find a check for the filing fees of the 2 LLC's. The names of his LLC's are as follows: Dixie Outdoor Adventures, LLC and Double Hook-Up, LLC. His current mailing address is P.O. Box 116, Fargo, Georgia 31631. His current number in which he can be reached is 229-506-1565. If we can be of any further help, please don't hesitate to call.

Sincerely,

LAW OFFICE OF CHAD R. CORLEE, LLC



Kellie Philpot

kp
Enclosures

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DOUBLE HOOK-UP, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

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TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

40 SE 897TH AVENUE
SUWANNEE, FLORIDA
32692

Mailing Address:

P.O. BOX 116
FARGO, GEORGIA
31631

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

WILLIAM (BILL) MILEY
Name

40 SE 897TH AVENUE
Florida street address (P.O. Box **NOT** acceptable)

<u>SUWANNEE</u>	<u>FLORIDA</u>	<u>32692</u>
City	State	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 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..

William "Bill" Miley
Registered Agent's Signature (REQUIRED)

WET: Chor. Card

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

COLIN MYERSON

P.O. BOX 116

FARGO, GEORGIA 31631

(Use attachment if necessary)

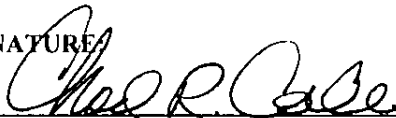
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

CHAD R. CORLEE

Typed or printed name of signee

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)

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TALLAHASSEE, FLORIDA