

# U6000052200

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(City/State/Zip/Phone #)

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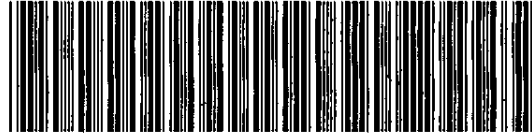
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TALLAHASSEE, FLORIDA

MAR - 8 2016

S. PRATHER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: DICELAB GAMES, 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:

R. STEVEN RUTA

\_\_\_\_\_  
Name of Person

BARRETT, CHAPMAN & RUTA, PA

\_\_\_\_\_  
Firm/Company

18 WALL STREET, 2ND FLOOR

\_\_\_\_\_  
Address

ORLANDO, FL 32801

\_\_\_\_\_  
City/State and Zip Code

steve@bclaw.net

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

For further information concerning this matter, please call:

R. STEVEN RUTA

407

839-6227

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

# **ARTICLES OF ORGANIZATION**

**OF**

## **DICELAB GAMES, LLC.**

The undersigned, acting as a manager and authorized representative of the limited liability company under the Florida Limited Liability Company Act, adopts the following Articles of Organization for such limited liability company:

### **ARTICLE I**

#### **NAME**

The name of this limited liability company is Dicelab Games, LLC.

### **ARTICLE II**

#### **PRINCIPAL OFFICE/MAILING ADDRESS**

The principal office and mailing address of the limited liability company is: 13305 Whisper Bay Drive, Clermont, Fl. 34711.

### **ARTICLE III**

#### **INITIAL REGISTERED OFFICE AND AGENT**

The name and street of the initial Registered Agent and office of this limited liability company is Aaron Holland, 13305 Whisper Bay Drive, Clermont, Fl. 34711.

### **ARTICLE IV**

#### **MANAGEMENT; INITIAL MANAGERS**

The limited liability company shall be a manger managed company. The name and address of the initial manager is:

Title:

MGR

Name and Address:

Aaron Holland  
13305 Whisper Bay Drive  
Clermont, Fl. 34711

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## ARTICLE V

### EFFECTIVE DATE

Pursuant to Fla. Stat. §605.0207, the effective date of the limited liability company existence is five (5) days prior to the filing of these Articles of Organization with the State of Florida.

## ARTICLE VI

### PURPOSE

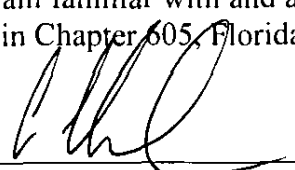
The purpose of the limited liability company is to engage in any activities or business permitted under the laws of the United States and Florida.

**IN WITNESS WHEREOF**, by the undersigned member or authorized representative of member has executed these Articles of Organization this 29 day of February, 2016.

  
\_\_\_\_\_  
Aaron Holland

### STATEMENT OF REGISTERED AGENT

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 obligation of my position as registered agent as provided for in Chapter 605, Florida Statutes.

  
\_\_\_\_\_  
Aaron Holland  
Registered Agent

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SECTION 605.0207  
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