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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

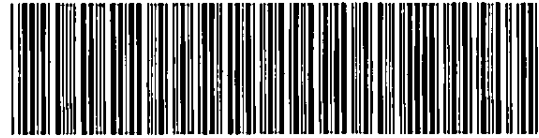
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAY 15 2018 10:00 AM
18 AUG 20 AM 9:11

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AUG 20 2018





THE LAW OFFICES OF
HOYT & BRYAN, LLC

FAMILY WEALTH & LEGACY COUNSELLORS

MARGARET "PEGGY" R. HOYT, J.D., M.B.A., B.C.S. †
RANDY C. BRYAN, J.D., B.C.S. † ‡
SARAH S. AUMILLER, J.D.
MICHELLE A. ADAMS, J.D.

‡ BOARD CERTIFIED IN WILLS, TRUSTS & ESTATES

† BOARD CERTIFIED IN ELDER LAW

*CERTIFIED LEGACY ADVISOR™

July 24, 2018

VIA FEDEX
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Re: Creation of Limited Liability Company – DOODLE INVESTMENTS, LLC

Dear Sir or Madam:

Enclosed please find the original Articles of Organization and Designation of Registered Agent for the above referenced Limited Liability Company. Please file at your earliest convenience. Also enclosed is our check for:

Please file at your earliest convenience. Our firm's check for:

(X) \$130
Filing Fees for
Conversion and Articles
of Organization,
Designation of Registered
Agent, Certificate of
Status

Please let me know if you have any questions or concerns. Thank you for your prompt attention to this matter.

Sincerely,

Michelle A. Adams
Attorney & Counsellor at Law

Enclosures: as stated
MH/ma

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Doodle Investments, 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:

Hubert K. Fouque
Name of Person

Firm/Company

1216 Palm Breeze Court
Address

Lake Mary, Florida 32746
City/State and Zip Code

KirtF@NationwideFleet.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Margaret "Peggy" Hoyt 407 977-8080
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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Doodle Investments, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1216 Palm Breeze Ct.
Lake Mary, Florida 32746

Same

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.)

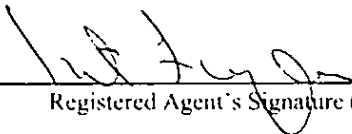
The name and the Florida street address of the registered agent are:

Hubert K. Fouque
Name

1216 Palm Breeze Ct.
Florida street address (P.O. Box **NOT** acceptable)

Lake Mary FL 32746
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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

18 AUG 20 AM 9: 91
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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:

Hubert K. Fouque

1216 Palm Breeze Ct.

Lake Mary, FL 32746

AMBR

Michele J. Fouque

1216 Palm Breeze Ct.

Lake Mary, FL 32746

(Use attachment if necessary)


ARTICLE V: Effective date, if other than the date of filing: 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.

Hubert K. Fouque

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)

18 AUG 20 AM 9:31
STATE OF FLORIDA
DEPARTMENT OF STATE