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Florida Department of State
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.
Account Number : 072720000336
Phone : (407)843-4600
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
DEUCES WILD, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

2019 JUN -6 PM 3:12

REGISTRATION SERVICES

SECRETARY OF STATE
TALLAHASSEE, FL

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ARTICLES OF ORGANIZATION
OF
DEUCES WILD, LLC

ARTICLE I - NAME

The name of this limited liability company is DEUCES WILD, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

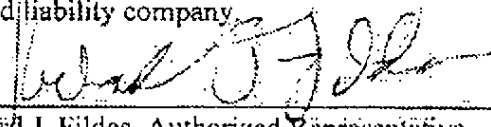
The mailing address and the street address of the principal office of the Company is 2200 W. Fawsett Road, Winter Park, Florida 32789.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 North Eola Drive, Orlando, Florida 32801, and the name of the initial registered agent of the Company at that address is Richard J. Fildes.

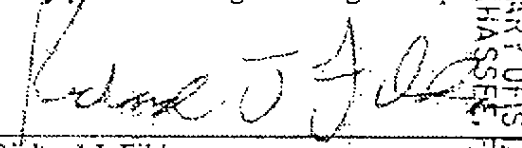
ARTICLE IV - MANAGEMENT

The Company is a member-managed limited liability company.


Richard J. Fildes, Authorized Representative.

ACCEPTANCE 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 obligations of my position as registered agent as provided in Chapter 605, Florida Statutes.


Richard J. Fildes

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