M14000008015

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	1
Special instructions to	rilling Officer.	
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Office Use Only



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TALLAHASSEE, FLORID

COVER LETTER

10;	Division of Corporation	3		
SUBJ	ECT. Double L	Investments	, LLC	
00110	<u></u>	Name of Limite	d Liability Company	
				ansact Business in Florida," Certificate of y company to transact business in Florida
Please	return all correspondence co	oncerning this matter to the	following:	
	Lee H. I	Hindman		
			ame of Person	
		Fi	rm/Company	
	P.O. Bo	x 1177		
			Address	
	El Centi	o, California	92244	
		<u> </u>	tate and Zip Code	
	hindmar	ilee@yahoo.	.com	
		E-mail address: (to be used	for future annual report notific	ation)
For fu	rther information concerning	this matter, please call:		
	Louis A. Ma	ygarden, III	850 434	l-2411
		Contact Person		ytime Telephone Number
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	Division Registra Clifton 2661 Ex	n of Corporations ation Section Building xecutive Center Circle ssee, FL 32301	
Enclo	osed is a check for the fo	ollowing amount: \$ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy



October 20, 2014

LEE H. HINDMAN PO BOX 1177 EL CENTRO, CA 92244

SUBJECT: DOUBLE L INVESTMENTS OF FLORIDA, LLC

Ref. Number: W14000063587

We have received your document for DOUBLE L INVESTMENTS OF FLORIDA, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch Regulatory Specialist II

Letter Number: 514A00022377

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Double L Investments, LLC	
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") Double L Investments of Florida, LLC	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.")	l
2 California 3 20-5033474	
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)	
4	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
_{5.} 1661 Yucca Drive	
El Centro, California 92243	
Mba (Street Address of Principal Office)	
_{6.} <u>P</u> .O. Box 1177	
El Centro, California 92244	
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	
Lee H. Hindman, IV, Trustee of the Hindman 1997 Family Trust Dated February 1997	istan _{er}
P.O. Box 1177, El Centro, California 32244	1
1.0.20x 111, 2. 001110, 0011101110 02211 07 F	J
0.7 · 35	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translate must be submitted)	
Tel Atrent MGR	
Signature of an authorized person (In accordance with section 605,0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are	e (m)

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.)

Lee H. Hindman, IV

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	the Limited Liability	Company is:		
Double L	Investments	s, LLC		
If unavailable, t	he alternate to be used	d in the state of Florida is:		
Double L	Investments	s of Florida, LLC		
2. The name and the Florida street address of the registered agent and office are:			SECNE TALLAH	14 NOV
Louis A. Maygarden, III			TARY	i man
		(Name)		Piv
	226 Plafox F	Place, Ninth Floor	STATE CORIDE	27
	Florida Str	reet Address (P.O. Box NOT ACCEPTABLE)	——) .,, ;	л
	Pensacola	_{FL} 32502		
		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, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

State of California

Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: DOUBLE L INVESTMENTS, LLC

FILE NUMBER: FORMATION DATE: 200607210001

02/10/2006

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

JURISDICTION:

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, DEBRA BOWEN, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of September 18, 2014.

> **DEBRA BOWEN** Secretary of State