

Division of Corporations

Page 1 of 2

L01000007167**Florida Department of State**

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000063754 5)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : HUBCO

Account Number : 104662003400

Phone : (516) 935-3940

Fax Number : (516) 935-3088

SECRETARY OF STATE
TALLAHASSEE, FLORIDA01 MAY -7 PM 3:46
AL

FILED

LIMITED LIABILITY COMPANY**Wren and Associates LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 MAY -7 PM 2:59

RECEIVED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Wren and Associates LLC**

ARTICLE II - Address

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

c/o Melinda K. Wren
1430 Palm Bay Road, NE
Palm Bay, FL 32905

FILED
01 MAY -7 PM 3:46
TALLAHASSEE, FLORIDA

ARTICLE III - Registered Agent, Registered Office & Registered Agent's signature

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

Melinda K. Wren

Name

1430 Palm Bay Road, NE

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Palm Bay, FL 32905

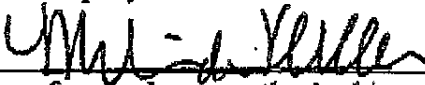
(City / State / Zip)

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 608, F.S.


Registered Agent's Signature - **Melinda K. Wren**

ARTICLE IV - Management (Check box if applicable)

- ☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company


Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Melinda K. Wren

Typed or printed name of signee