

L04 0000 70757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

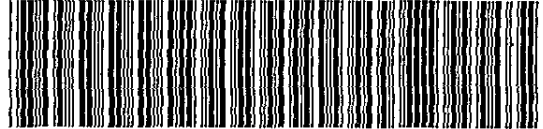
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900041219519

09/27/04--01019--005 **125.00

FILED

04 SEP 27 AM 11:09

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

9/29/04
[Signature]

Joseph M. Scheyd, Jr. P.A.

ATTORNEY AT LAW
1221 AIRPORT ROAD • SUITE 209
DESTIN, FLORIDA 32541
TEL: (850) 837-1171
FAX: (850) 837-3317

September 23, 2004

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

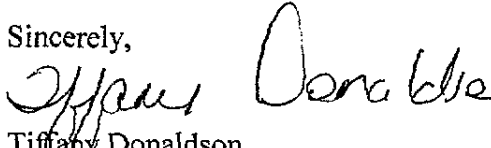
RE: Articles of Organization for LWC, LLC

Dear Sir or Madam:

Enclosed please find the original Articles of Organization, including Certificate of Designation of Registered Agent/Registered Office for the above-referenced corporation. Also enclosed is a check in the amount of \$125.00 to cover the filing fee.

Thank you for your assistance in this matter. If you have any questions or need additional information, please give me a call.

Sincerely,


Tiffany Donaldson
Legal Assistant for
Joseph M. Scheyd, Jr.

/tjd

Enclosures

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 SEP 27 AM 11:09

FILED

**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I - NAME

The name of the Limited Liability Company is: LWC, L.L.C.

ARTICLE II - ADDRESS

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

Mailing Address:

Street Address:

Post Office Box 611086
Rosemary Beach, Florida 32461

1101 Sawgrass Court, Unit 301
Panama City Beach, Florida 32413

ARTICLE III - DURATION

The period of duration for the Limited Liability Company shall be a period of fifty (50) years from its date of organization.

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by a manager or managers and the names and address of such managers who are to serve as initial managers are:

Barry Greer
1101 Sawgrass Court, Unit 301
Panama City Beach, Florida 32413

Chalres Feagin
10 Fox Chase
Dothan, Alabama 36305

ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS

The terms and conditions of the admission of additional members shall be established by the Regulations of the organization as may be amended from time to time.

FILED
04 SEP 27 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS


In the event of the death, retirement, resignation, expulsion, or bankruptcy of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company, the remaining Members shall have the right either to purchase the interest of the terminating member in the limited liability company or to terminate and liquidate the business, pursuant to the Regulations of the limited liability company.



Barry Greer

Before me, the undersigned authority personally appeared **Barry Greer**, who is personally known to me or who produced _____ as identification, and executed the within document for purposes stated therein.

SUBSCRIBED AND SWORN to before me this 30 day of Sept, 2004.



Tiffany Donaldson
Notary Public
My Commission Expires: _____



FILED
04 SEP 27 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

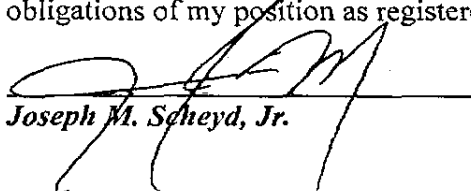
**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is LWC, LLC.
2. The name and address of the registered agent and office is:

Joseph M. Scheyd, Jr.
1221 Airport Road, Suite 209
Destin, Florida 32541

Having been named as registered agent and to accept service of process for the above stated limited liability 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.



Joseph M. Scheyd, Jr.

10-30-04

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 SEP 27 AM 11:09

FILED