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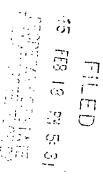
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# FLORIDA DEPARTMENT OF STATE Division of Corporations

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February 25, 2015

THOMAS S EDWARD, JR., ESQ 501 RIVERSIDE AVENUE STE 601 JACKSONVILLE, FL 32202

SUBJECT: WOLFRAMS'S WORKSHOP, LLC

Ref. Number: W15000013907

We have received your document for WOLFRAMS'S WORKSHOP, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 215A00003991



# Personal Injury and Commercial Trials

www.EdwardsRagatz.com

Thomas S. Edwards, Jr. Eric C. Ragatz Katherine E. Loper Lindsay L. Tygart 501 Riverside Avenue, Suite 601 Jacksonville, Florida 32202 Phone: 904.399.1609 Fax: 904.399.1615

Toll Free: 800.366.1609

April 15, 2015

VIA FEDERAL EXPRESS OVERNIGHT DELIVERY

#7733 7229 6699

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE:

WOLFRAM'S WORKSHOP, LLC

Ref No. W15000013907

Dear Sir or Madam:

Pursuant to your letter dated February 25, 2015, along with this letter for filing with the Division of Corporations please find the corrected Articles of Organization of Wolfram's Workshop, LLC which have been corrected pursuant to your letter to reflect the street address as the principal office address and the post office box address as the mailing address. Also enclosed please find a copy of your letter dated February 25, 2015.

In my previously letter I had requested a certified copy of the Articles of Organization be provided in connection with this matter. In that regard, I am enclosing a copy of the corrected Articles of Organization along with this letter and a stamped, self-addressed envelope.

Should you have any questions in connection with this matter or require any additional information, please do not hesitate to contact me.

Very fruly yours.

TSEjr:kah Enclosures



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# Personal Injury and Commercial Trials

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Toll Free: 800,366,1609

February 12, 2015

Department of State Division of Corporations Corporate Filings PO Box 6327 Tallahassee, FL 32314

RE: WOLFRAM'S WORKSHOP, LLC

Dear Sir or Madam:

Along with this letter for filing with the Division of Corporations please find the following:

- 1. Articles of Organization of Wolfram's Workshop, LLC; and
- 2. Certificate of Designation Registered Agent/Registered Office.

I would request a certified copy of the Articles of Organization be provided in connection with this matter. In that regard, I am enclosing a copy of the Articles of Organization along with this letter and a stamped, self-addressed envelope. Finally, please find a check in the amount of One Hundred Fifty-Five Dollars (\$155.00) in payment of the filing fees in the amount of One Hundred Twenty-Five Dollars (\$125.00) and the fee for a certified copy of the Articles of Organization in the amount of Thirty Dollars (\$30.00).

Should you have any questions in connection with this matter or require any additional information, please do not hesitate to contact me.

Very truly yours,

Thomas S. Edwards Jr.

Thomas S. Edwards, Jr.

Signed electronically to avoid delay

TSEjr:kah Enclosures





#### ARTICLES OF ORGANIZATION

#### **OF**

#### WOLFRAM'S WORKSHOP, LLC

These Articles of Organization are submitted for the purpose of forming a limited liability company pursuant to the Florida Limited Liability Company Act, Chapter 605, Florida Statutès, as the same may from time to time be amended (the "Act").

#### **ARTICLE I - NAME**

The name of this limited liability company (THE "Company") is WOLFRAM'S WORKSHOP, LLC.

#### ARTICLE II - ADDRESS

The address of the principal office is 21751 Jingle Road, Christmas, Florida 32709. The mailing address of this Company is PO Box 095, Christmas, Florida 32709.

#### ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this Company is 501 Riverside Avenue, Suite 601, Jacksonville, Florida 32202 and the name of its initial registered agent at such address is Thomas S. Edwards, Jr.

#### ARTICLE IV - MANAGEMENT OF THE COMPANY

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

#### ARTICLE V – LIMITED LIABILITY

Except as otherwise expressly provided by the Act, no member, manager, officer, agent or employee of the Company shall be personally liable for the debts, obligations or liabilities of the Company, whether arising in contract, tort or otherwise, or for the acts or omissions of any other member, manager, officer, agent or employee of the Company.

IN WITNESS WHEREOF, the undersigned, being a Member of the Company, has executed these Articles of Organization this 3st day of March, 2015. In accordance with Chapter 605, Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.

Richard A. Edwards, Member

# CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Chapter 605, Florida Statutes, the below named limited liability company, organized under the laws of the State of Florida, 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:

### WOLFRAM'S WORKSHOP, LLC

2. The name and address of the registered agent and office are:

Thomas S. Edwards, Jr. 501 Riverside Avenue, Suite 601 Jacksonville, Florida 32202

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.

Dated: January 07, 2015

Signature of Registered Agent

Thomas S. Edwards, Jr.