

# L00000005058

**J. Michael Collins**  
Attorney at Law

April 24, 2000

Registration Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL 32399  
(850)487 6051

600003229656-2  
-04/28/00--01106--003  
\*\*\*\*160.00 \*\*\*\*160.00

To Whom It May Concern:

Please find enclosed a check for \$160.00, Articles of Organization, and Certificate of designation of registered agent.

Pursuant to the filing rules the following information is provided:

J. Michael Collins  
184 Eglin Parkway N.E., Suite 8  
Fort Walton Beach, FL 32548  
(850) 243 3151

Thank you for your cooperation.

Sincerely,



J. Michael Collins

FILED  
00 APR 28 PM 2:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Name Availability	<i>Also: Please provide a checked copy and rec certificate of status.</i>
Document Examiner	
Updater	
Updater Verifier	
Acknowledgement	
W. P. Verifier	DCC

1250 North Dearborn Parkway, Suite 12A, Chicago, Illinois 60610 \* Phone 312-280-0957 \* Fax 312-280-0023  
E-Mail CollinsWyatt@aol.com

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

CollinsWyatt Financial, LLC

## ARTICLE II - Address:

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

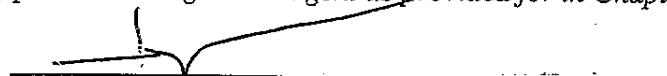
184 Eglin Parkway N.E., Suite 8  
Fort Walton Beach, Florida 32548

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

James Wyatt  
Name  
184 Eglin Parkway N.E. Suite 8  
Florida street address (P.O. Box **NOT** acceptable)  
Fort Walton Beach FL 32548  
City, State, and 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

## Article IV - Management (Check box if applicable.)

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

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TALLAHASSEE, FLORIDA

(An additional article must be added if an effective date is requested)

  
Signature of a member or an 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.)

J. Michael Collins  
Typed or printed name of signer

### FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (OPTIONAL)  
\$ 5.00 Certificate of Status (OPTIONAL)

**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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE  
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

CollinsWyatt Financial, LLC

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

James Wyatt

(Name)

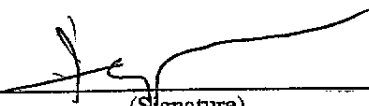
184 Eglin Parkway N.E. Suite 8

Florida street address (P.O. Box **NOT** ACCEPTABLE)

Fort Walton Beach, FL 32548

City/State/Zip

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(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

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