Attorney at Law 10014 S. Federal Highway Port St. Ľucie, FĽ. 34952

Phone: (561) 337-5100 Fax: (561) 337-5196



Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re:

W.A.M., L.L.C.

Limited Liability Company Filing

300003340533--0 -07/31/00--01109--007 ****130.00 ****130.00

Dear Sir or Madame:

Enclosed herewith please find the original Articles of Organization and Certificate of Designation of Registered Agent for the above named Limited Liability Company.

I have additionally enclosed my attorney's check in the amount of \$130.00 for the filing fees and for a certificate of status. A return, preaddressed envelope is enclosed for your convenience.

Please feel free to contact me if you have any questions.

Very truly yours,

Patricia A. Baldwin

Enclosures

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. NAME

The name of the Limited Liability Company is: W.A.M., L.L.C.

ARTICLE II. ADDRESS

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

2162 Reserve Park Trace Port St. Lucie, FL 34983

ARTICLE III. REGISTER AGENT

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

Patricia A. Baldwin, Attorney at Law 10014 S. Federal Highway Port St. Lucie, FL 34952

ARTICLE IV. MANAGEMENT

- ☐ The Limited Liability Company is to be a manager-managed company.
- The Limited Liability Company is to be managed by the members.

Signature of a member or an authorized representative of a member.

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

DON MAYNARD

Typed or printed name of signee

Filing Fee: \$100.00 for Articles

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: W.A.M., L.L.C.	
2. The name ar	d Florida street address of the registered agent are:	
_	PATRICIA A. BALDWIN, Attorney at Law Name	-
-	10014 S. Federal Highway Florida street address (P.O. Box NOT ACCEPTABLE)	··· ·
_	Port St. Lucie, FL 34952 City, State and Zip	? == ==================================
limited liability	ned as registered agent and to accept service of process for the above stated company at the place designated in this certificate, I hereby accept the egistered agent and agree to act in this proper and complete performance of my familiar with and accept the obligations of my position as registered agent	<u>ာ</u>
-	Gatricia A. Baldum Signature	

Filing Fee: \$25.00 for Designation of Registered Agent