

# L010000013921

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

385-6735

(City, State, Zip)

(Phone #)

300004539783--0

-08/17/01--01035--007

\*\*\*\*125.00 \*\*\*\*125.00

OFFICE USE ONLY

## CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. WPA Venture, LLC  
(Corporation Name) (Document #)
2. effective date  
(Corporation Name) (Document #)
3. August 16, 2001  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2.00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

### NEW FILINGS

Profit

Non Profit

Limited Liability

Domestication

Other

### AMENDMENTS

Amendment

Resignation of R.A., Officer/Director

Change of Registered Agent

Dissolution/Withdrawal

Merger

### OTHER FILINGS

Annual Report

Fictitious Name

Name Reservation

### REGISTRATION/ QUALIFICATION

Foreign

Limited Partnership

Reinstatement

Trademark

Other

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 AUG 20 AM 11:01

APPROVED  
AND  
FILED

WOT-1987

Examiner's Initials

8-20-01



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

August 17, 2001

FILINGS, INC.

SUBJECT: WPB VENTURE, LLC  
Ref. Number: W01000019087

We have received your document for WPB VENTURE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following:

The document must contain the entity's complete mailing address.

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) 245-6025.

Trevor Brumbley  
Document Specialist

Letter Number: 601A00047147

01 AUG 20 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

ARTICLES OF ORGANIZATION

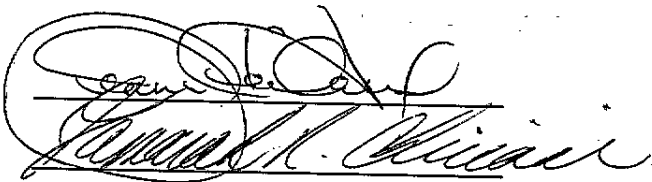
OF

**WPB VENTURE, LLC**

1. The name of this limited liability company is WPB VENTURE, LLC (the "Company").
2. The address of the principal office of the Company is 505 Wekiva Springs Road, Suite 800, Longwood, Florida 32779. This is also the mailing address.
3. The name and street address of its initial registered agent for service of process in the state of Florida is Philip F. Keidaish, Jr., 505 Wekiva Springs Road, Suite 800, Longwood, Florida 32779.
4. The Company is to be managed by one or more managers to be selected by the members and is therefore a manager-managed company.
5. The Company shall exist from the date of filing of these Articles of Organization with the Department of State until the earlier of fifty (50) years from the date of filing or the occurrence of any of the events specified in Florida Statutes Section 608.441, unless continued by the unanimous consent of all of the remaining members.
6. The Company is organized for the purpose of transacting all lawful activities and businesses that may be conducted by a limited liability company under the laws of Florida.
7. The name(s) and address(es) of the organizer(s) executing these articles is:

Philip F. Keidaish, Jr.  
505 Wekiva Springs Road, Suite 800  
Longwood, Florida 32779

The undersigned executed these Articles of Organization effective as of the 16 day of August, 2001.



By:

Philip F. Keidaish, Jr.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 AUG 20 AM 11:01

APPROVED  
AND  
FILED

STATE OF FLORIDA  
COUNTY OF SEMINOLE

The foregoing instrument was acknowledged before me this 16th day of August, 2001, by Philip F. Keidasih, Jr., who is personally known to me or who has produced \_\_\_\_\_ as identification and who did not take an oath.

Carolyn Van Sandt

Carolyn Van Sandt  
(print name)

Notary Public/State of Florida  
My Commission Expires:



Carolyn Van Sandt  
MY COMMISSION # CC978232 EXPIRES  
February 28, 2005  
BONDED THRU TROY FAIR INSURANCE, INC.

ACCEPTANCE BY REGISTERED AGENT

I, Philip F. Keidaish, Jr., 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, 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 in Chapter 608, F.S.

8/16/01  
Date

Philip F. Keidaish, Jr.  
Signature

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 AUG 20 AM 11:01

APPROVED  
AND  
FILED