

LO1000021600

ATTORNEYS' TITLE

Requestor's Name

660 E. Jefferson St.

Address

Tallahassee, FL 32301

City/St/Zip

850-222-2785

Phone #

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

1- MALONE-WINARSKI ENTERPRISES, L.L.C.

2-

3- Remove affidavit

4- per Barbara

☒ Walk-in

☐ Pick-up time ASAP

☐ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

01 DEC 13 PM 1:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
AND
ROUTED

RECEIVED
01 DEC 13 AM 11:25

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

3000004724879--5
-12/13/01--01060--013
****125.00 ****125.00

Examiner's Initials

JB
12-13-01

**ARTICLES OF ORGANIZATION OF
LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

ARTICLE I Name:

The name of the Limited Liability Company is: MALONE-WINARSKI ENTERPRISES, L.L.C.

ARTICLE II Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 1511 US Highway 1, Suite 201, Sebastian, Florida 32958.

ARTICLE III Duration:

The period of duration for the Limited Liability Company shall be: perpetual.

ARTICLE IV Management:

(Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name and address of the managing member is:

Roxanne Malone-Winarski
1511 US Highway 1, Suite 201
Sebastian, Florida 32958

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

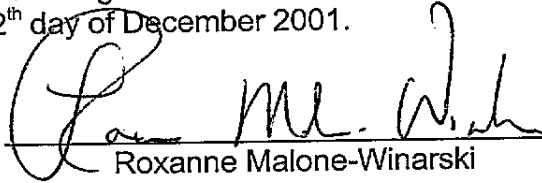
ARTICLE V Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: duly qualified additional members may be admitted on approval of Members owning at least sixty-six and two-thirds (66-2/3 percent) of the percentages then owned by all Members; provided that such proposed new Member shall execute a counterpart of the Regulations and agree to bound by all provisions thereof and execute any other documents that the Company may deem necessary or appropriate.

ARTICLE VI Members Rights to Continue Business

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be as follows: the Company shall continue upon the withdrawal of a member by reason of death, retirement, resignation, or expulsion.

IN WITNESS WHEREOF, we have signed these Articles of Organization and acknowledged them to be our act this 12th day of December 2001.


Roxanne Malone-Winarski

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TALLAHASSEE, FLORIDA

APPROVE
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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 registered agent of the Limited Liability Company is Ronald Winarski.
2. The name and the Florida street address of the registered agent and registered office are: Ronald Winarski, 1703 Greytwig Place, Malabar, Florida 32950.

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.

Ronald Winarski

Ronald Winarski

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AND
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TALLAHASSEE, FLORIDA