



# L020000013490

ACCOUNT NO. : 072100000032

REFERENCE : 597356 7338055

AUTHORIZATION :

COST LIMIT : \$ 125.00

*Patricia Pizit*

FILED  
02 JUN -3 PM 12:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : May 24, 2002

ORDER TIME : 10:55 AM

ORDER NO. : 597356-001

CUSTOMER NO.: 7338055

CUSTOMER: Mr. Wayne A. Blockel  
Mr. Wayne A. Blockel  
1903 Tumbleweed Drive  
Holiday, FL 34690

RECEIVED  
02 JUN -3 PM 12:18  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: WAYNE BLOCKEL, LLC

300005665283--4

EFFECTIVE DATE: ☐

XX ARTICLES OF ORGANIZATION ☐

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Angie Glisar - EXT. 1124

EXAMINER'S INITIALS: \_\_\_\_\_

L02-13490  
*OR*

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

WAYNE BLOCKEL, LLC

## ARTICLE II - Address:

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

1903 TUMBLEWEED DRIVE, HOLIDAY, FL 34690

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

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

Corporation Service Company

Name

1201 Hays Street

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

Tallahassee FL 32301

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.*

Corporation Service Company

By: Deborah D. Skipper

Registered Agent's Signature

Deborah D. Skipper  
Asst. V. Pres.

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

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

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

Deborah D. Skipper

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.)

DEBORAH D. SKIPPER

Typed or printed name of signee

### 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)

02 JUN -3 PM 12:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

MANAGING MEMBERS  
OF  
WAYNE BLOCKEL, LLC

WAYNE BLOCKEL  
1903 TUMBLEWEED DRIVE  
HOLIDAY, FL 34690

FILED  
02 JUN -3 PM 12:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

# LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of WAYNE BLOCKEL, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

FILED  
02 JUN -3- PM 12:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This Limited Power of Attorney is executed on this      day of      , 2002

Wayne A. Blockel  
Signature

WAYNE A. BLOCKEL  
Print Name of Signer

WITNESS:

Akemi Bone  
Signature

Akemi Bone  
Print Name of Witness

WITNESS:

Joyce Stramiello  
Signature

Joyce Stramiello  
Print Name of Witness

STATE OF FLORIDA  
COUNTY OF PASCO

The foregoing instrument was acknowledged  
before me this 29 day of MAY,  
2002 by Wayne A. Blockel  
who is personally known to me or has  
produced FL Dr Lic as identification,  
B 424-881-58-066-0