

L030000001545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

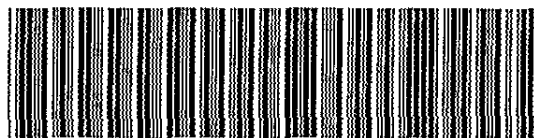
(Document Number)

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FLORIDA DEPT. OF STATE
REGISTRATION SECTION
DIVISION OF CORPORATIONS

DEAR SIRs;

ENCLOSED PLEASE FIND L.L.C. APPLICATION AND COMPANY CHECK.
OUR ADDRESS IS AS FOLLOWS:

W.W.W. L.L.C.
18650 LAKESIDE WAY S.E.
TEQUESTA, FL 33469
PH. 561-743-0173
FAX 561-743-8991

WAYNE HERRMANN, IS THE REPRESENTATIVE FOR THE COMPANY. THE
COMPANY WILL PRIMARILY DO BUSINESS IN REAL ESTATE.

PLEASE CALL FOR ANY FURTHER INSTRUCTIONS. THANKYOU.

RESPECTFULLY,

A handwritten signature in black ink, appearing to be 'Wayne Herrmann', with a long horizontal line extending to the right.

WAYNE HERRMANN

11/8/02
wdh



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

December 10, 2002

WAYNE HERRMANN
W.W.W. L.L.C.
18650 LAKESIDE WAY S.E.
TEQUESTA, FL 33469

SUBJECT: W.W.W. L.L.C.
Ref. Number: W02000034552

We have received your document for W.W.W. L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the application in its entirety. You must put the name of the LLC in Article I and the address in Article II. You must change Article III.

A limited liability company may not serve as its own registered agent. Please designate an individual or an active entity, with a Florida street address. A post office box is not acceptable.

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) 245-6913.

Diane Cushing
Corporate Specialist

Letter Number: 102A00065251

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

W.W.W. L.L.C.

ARTICLE II - Address:

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

18650 LAKESIDE WAY S.E. TEQUESTA, FL 33469

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

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

WAYNE HERRMANN

Name

942 POMPAÑO DRIVE

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

JUPITER, FL 33458

FL

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 is, therefore, a manager - managed company.

(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.)

WAYNE D. HERRMANN

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)

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STATE OF FLORIDA