

### Florida Department of State

Division of Corporations Public Access System

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Fax Number : (850) 205-0383

From:

Account Name : THE BUSINESS LAW GROUP

Account Number : I20000000233 Phone : (407)835-1234 Fax Number : (407)425-0032 EPFECTIVE DATE

DIVIDION OF CORPORATION

### LIMITED LIABILITY COMPANY

Press Williamson Unlimited, LLC

Certificate of Status	0
Certified Copy	0
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# ARTICLES OF ORGANIZATION OF PRESS WILLIAMSON UNLIMITED, LLC A Florida Limited Liability Company

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#### ARTICLE I NAME

The name of this limited liability company is Press Williamson Unlimited, LLC, referred to in these Articles of Organization as the "Company."

#### ARTICLE II MAILING AND STREET ADDRESS

The mailing address of the principal office of the Limited Liability Company is as follows:

5263 Los Palma Vista Drive Orlando, Florida 32837

The street address of the principal office of the Limited Liability Company is as follows:

5263 Los Palma Vista Drive Orlando, Florida 32837

### ARTICLE III REGISTERED AGENT

The address of the initial Registered Office and the Registered Agent at such address are as follows:

Christopher Coleman 5263 Los Palma Vista Drive Orlando, Florida 32837

### ARTICLE IV MANAGEMENT

The Company is to be a member-managed company. The name and address of the initial Member-Manager is as follows:

Name

Address

Press Williamson Financial Group, LLC

5263 Los Palma Vista Drive Orlando, Florida 32837

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### ARTICLE V COMMENCEMENT OF COMPANY'S EXISTENCE

In accordance with Section 608.409(1), Florida Statutes, the Company's existence shall be deemed to have commenced at 12:01 a.m. on June 7, 2003.

#### ARTICLE VI DURATION

The Company's existence shall be perpetual, unless terminated earlier by the unanimous written agreement of all Members.

### ARTICLE VII AMENDMENT

The power to adopt, alter, amend or repeal these Articles and the Operating Agreement of this Company shall be vested in the voting Members of the Company.

### ARTICLE VIII APPLICABLE LAW

The Company is created pursuant to Chapter 608, Florida Statutes, and shall be governed by the laws of the State of Florida.

Dated this Lo day of June, 2003.

PRESS WILLIAMSON FINANCIAL

GROUP, LLC, Manager

Christopher Coleman, Member-Manager

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT AND 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.

- The name of the limited liability company is "Press Williamson Unlimited, LLC".
- 2. The name and the Florida street address of the Registered Agent are as follows:

Christopher Coleman 5263 Los Palma Vista Drive Orlando, Florida 32837

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 of the Florida Statutes.

Dated effective the // day of June, 2003,

hristopher Coloman

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