## 

WIS. ELIASON  5515 OAKMONT DR.  PACE, FL. 32571
(Address)
(City/State/Zip/Phone #)
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILT	Y COMPANY FILED
ARTICLE I - Name: The name of the Limited Liability Company is:	03 AUG -4 PM 3: 24
W.S. ELIASON, Ltd. Company	CALLAHASSEF, FLORIDE
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liabi	
5515 DAKMONT DRIVE, PACE, FL	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's S	
The name and the Florida street address of the registered agent are:	
WHYNN S. ELIASON	
SSIS OAKMONT DRIVE, PACE, F	FL 32571
Florida street address (P.O. Box NOT acceptable)	
PACE, FL 32571 City, State, and Zip	
City, State, and Zip	
registered agent and agree to act in this capacity. I further agree to comply with the statutes relating to the proper and complete performance of my duties, and I am fall accept the obligations of my position as registered agent as provided for in Chapte Registered Agent's Signature	miliar with and
(An additional article must be added if an effective date is reque	ested)
Carine D. Eliason	
Signature of a member or an authorized representative of a member	 r.
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjuthat the facts stated herein are true.)	r Iry
CORINNE D. ELIASON  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)  \$\ilde{4} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
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