

L03000048765Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000327076 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 222-9428RECEIVED
03 DEC - 1 PM 4:22
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

CWL, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

APPROVED
AND
FILED
03 DEC - 1 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing

Public Access Help

12-2-03

ARTICLES OF ORGANIZATION
LIMITED LIABILITY COMPANY

Executed by the undersigned for the purpose of forming a Florida limited liability company under Ch. 608 of the Florida Statutes.

Article 1. The name of the limited liability company is:

CWI, LLC

Article 2. The mailing address and street address of the principal office of the limited liability company is:

4313 Triangle Street
McFarland, WI 53558

Article 3. Registered Agent, Registered Office & Registered Agent's Signature:

CT Corporation System
c/o CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

See written statement of registered agent attached hereto.

Article 4. Management of the limited liability company shall be vested in a manager or managers.


Jean Murphy, Member

03 DEC -1 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

WRITTEN STATEMENT OF REGISTERED AGENT
FOR CWI, LLC

Having been named as registered agent and to accept service of process for CWI, LLC at the place designated in the Articles of Organization for such limited liability company, 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.

C T Corporation System

By: Beverlee A. Stuewa

Title: Beverlee Stuewa

Beverlee Stuewa
Assistant Secretary

03 DEC -1 AM 9:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED