

LO4000031618

00789-01122-00671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

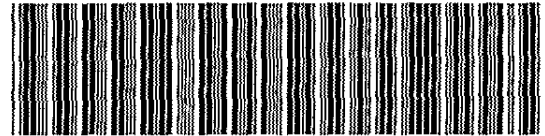
Special Instructions to Filing Officer:

4/22

FLC

W04-12404

Office Use Only



700030650117

03/18/04--01032--007 **100.00

MJH, 3

04/23/04--01026--001 **25.00

04 APR 22 PM 4:33

BURR & FORMAN LLP

ATTORNEYS AND COUNSELORS

Diane H. Friend
Direct Dial: 404-685-4264
Email: dfriend@burr.com

Post Office Box 54617
Atlanta, Georgia 30308

(404) 815-3000
(404) 817-3244 (Fax)

March 16, 2004

VIA U.S. MAIL

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**Re: Wee-Man Enterprises, LLC
Florida LLC**

Dear Ladies and Gentlemen:

Enclosed please find the original Transmittal Letter, Articles of Organization for a Florida Limited Liability Company and a check in the amount of \$100.00 for Filing fees regarding the above reference entity.

If you should have any questions, please contact: Rhonnel Hearn at (352) 372-2509.
1712 N.E. Waldo Road, Gainesville, Florida, 32609.

Sincerely,



Diane H. Friend
Legal Assistant

Enclosure

cc: Edward Rappaport (via email without enclosure)

Birmingham
SouthTrust Tower
420 North Twentieth Street, Suite 3100
Birmingham, Alabama 35203
(205) 251-3000
169886

Montgomery
RSA Tower
201 Monroe Street, Suite 1950
Montgomery, Alabama 36104
(334) 241-7000

Atlanta
One Georgia Center
600 West Peachtree Street, Suite 1200
Atlanta, Georgia 30308
(404) 815-3000

Jackson
210 East Capitol Street
Suite 2120
Jackson, Mississippi 39201
(601) 355-3434

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WEE-MAN ENTERPRISES, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RODNEY LONG

(Name of Person)

(Firm/Company)

1712 N.E. WALDO RD.

(Address)

Gainesville, FL 32609

(City/State and Zip Code)

For further information concerning this matter, please call:

RHONNEL HEARN

(Name of Person)

at (352) 372-2509

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

March 31, 2004

DIANE H. FRIEND
BURR & FORMAN LLP
POST OFFICE BOX 54617
ATLANTA, GA 30308

SUBJECT: WEE-MAN ENTERPRISES, LLC
Ref. Number: W04000012404

We have received your document for WEE-MAN ENTERPRISES, LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

There is a balance due of \$25.00.

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) 245-6967.

Michelle Hodges
Document Specialist

Letter Number: 404A00020773

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

WEE-MAN ENTERPRISES, LLC

ARTICLE II - Address:

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

Principal Office Address:

1712 NE Waldo Road
Gainesville, FL 32609
Aolachua County, FL

Mailing Address:

1712 NE Waldo Road
Gainesville, FL 32609
Aolachua County, FL

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

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

RHONNEL HEARN

Name

1919 N.E. 7th PL.

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

Gainesville FLORIDA

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, Florida Statutes..

Rhonnell Hearn

Registered Agent's Signature

FILED
04 APR 22 PM 4:33
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
THE COUNTY OF FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MANAGER


CLINTON PORTIS
1919 NE 7th PL
GAINESVILLE FL 32641

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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.)

CLINTON PORTIS

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)