# LOU DODD52-808

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(During Falls, Name)				
(Business Entity Name)				
Davis and Number				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only

F \$105 Cus 5



000036907570

07/16/04--01003--006 \*\*130.00



W4-52808

## Neil E. Mayhew

16104 South County Road 325 Hawthorne, Florida 32640 Telephone: (352) 466-3205

Via First Class U.S. Mail

July 2, 2004

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Dear Sirs:

Enclosed please find on behalf of myself, Neil E. Mayhew, as the sole organizer, member and managing member of a new Florida limited liability company to be named Wall-Nut Enterprises LLC, the following:

- 1. a check in the amount of \$130.00 for the cost of filing new articles of organization, designation or registered agent, and certificate of status for Wall-Nut Enterprises LLC;
- original Articles of Organization for Wall-Nut Enterprises LLC;
- 3. transmittal letter for filing new articles of organization.

Upon the filing of these new articles of organization, please send the certified copy and certificate of status to me at the following address:

Neil E. Mayhew 16104 South County Road 325 Hawthorne, Florida 32640 Telephone: (352) 466-3205

Please advise if you have any questions.

Sincerely

Neil E Mayhew, Managing Member

Wall-Nut Enterprises LLC

Enclosures

# TRANSMITTAL LETTER

	stration Section sion of Corporations				
SUBJECT:	Wall-Nut 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:					
	Neil E. Mayhew				
	(Name of Person)				
(Firm/Company)					
16104 South County Road 325					
(Address)					
Hawthorne, FL 32640 (City/State and Zip Code)					
For further in	formation concerning this matter, please call:				
Neil E	. Mayhew at (352) 466-0651 (Name of Person) (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 ALLA ASE FLORIDA

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Wall-Nut Enterpris	ses LLC
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
16104 South County Road 325	16104 South County Road 325
Hawthorne, FL 32640	Hathorne, FL 32640
RTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the re	gistered agent are:
	gistered agent are:
The name and the Florida street address of the remainder	y Road 325

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..

Registered Agent/s Signature

Page 1 of 2 (CONTINUED)

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

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

Title:	Name and Address:			
"MGR" = Manager "MGRM" = Managing Member				
MGRM	Neil E. Mayhew 16104 South County Road 325 Hawthorne, FL 32640			
			÷	
(Use attachment if necessary)				
NOTE: An additional article must be	addéd if an effective date is requested.		Amin's Amin's Amin's Control	
REQUIRED SIGNATURE:	uthorized representative of a member.	ASSE FIG	7	
(In accordance with section 608.	(.408(3), Florida Statutes, the execution affirmation under the penalties of perjury ue.)	AIDA File	<u>है</u> ज़	
Typed or pri	inted 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)