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# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: WBJ 8141 THAM! (Name of Limited)	ESC, L. L. C. Liability Company)	
The enclosed Articles of Organization and fee(s) are su	bmitted for filing.	
Please return all correspondence concerning this matter	to the following:	
CHARLES G. TESS	ame of Person)	
CoGOTO MARKETIS	IG, P. A. p. irm/Company)	
Z0283 STATE	ERD. 7 Sur	2005 FEB 18 SECTIVE IN
BOCA RATON (City/S	FLv 33 49 State and Zip Code)	<del>[1]</del> .
For further information concerning this matter, please c	all:	
CHARLES G-TESSLER (Name of Person)	Area Code & Daytime Te	-2103 dephone Number)
Enclosed is a check for the following amount:		
\$125.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING AI	DDRESS:

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

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company i	s:			
WBJ 8141 THAME	S-C LLCZ			
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liabili	ity Comp	oany is	s:
Principal Office Address:	Mailing Address:			
20283 ST-RD.7	7737 CHERTRY IS	¿Zoss	an I	YA
BORA RATON, JE 33498	2737 CHERTY IS ROYDTON BEACHS	FL 3	343	37
ARTICLE III - Registered Agent, Registere	ed Office, & Registered Agent's Sig	;nature:		
The name and the Florida street address of the	e registered agent are:	SEURE 1. 35 E TALLAHASSE	2005 FEB	ا ا ا
	S. TESSLER	SSEI	81	1
20933 BOCA RIDGE DR. W BOCA RATON, FL 33428			Ċ	
	address (P.O. Box NOT acceptable)	5		

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, F.S..

City, State, and Zip

Registered Agent s Bigitature

(CONTINUED)

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager	<del> </del>
"MGRM" = Managing Member	
Q = = = = ==	1/16 1 010000000000000000000000000000000
<u> </u>	WILLIAM ATTAKEL
	16480 BRACBURIT RIDGETB
/ ^	Delivery Beauty 52446,
VICE PRESIDENT	7737 CHERRY BLOSSOM Way
VIVE OFFERING	BERTANA (TODADA)
	BOYNTON BEACH, FL 33437
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77 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /	

(Use attachment if necessary)

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

**REQUIRED SIGNATURE:** 

Signature of a member of 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.)

NHAD GORDON-Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)