

L05000048833

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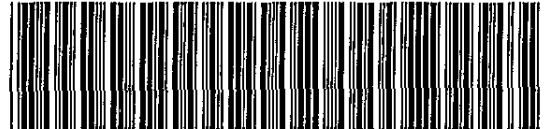
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Acknowledgement

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W. P. Verifier

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2005 MAY 17 P 4:17
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FILING OFFICE

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WILLISHER PARTNERSHIP, LTD
(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:

WILLIAM H. WELCH
(Name of Person)

(Firm/Company)

P.O. Box 2847
(Address)

NANTUCKET, MA 02584
(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM WELCH at (508) 361-3111
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 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:
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

FILED
2005 MAY 17 PM 4:17
TALLAHASSEE, FL
STATE OF FLORIDA
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

April 27, 2005

WILLIAM H. WELCH
P.O. BOX 2847
NANTUCKET, MA 02584

SUBJECT: WILLSHER PARTNERSHIP, LTD.
Ref. Number: W05000021255

We have received your document for WILLSHER PARTNERSHIP, LTD. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

The name of the entity cannot include "PARTNERSHIP." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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) 245-6913.

Diane Cushing
Document Specialist

Letter Number: 605A00029158

2005 MAY 1 P 11:17
SECRET
FALL 2005

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WILLSHELD ~~PARTNERSHIP~~, LTD. CO.

ARTICLE II - Address:

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

Principal Office Address:

1211 CATHERINE WEST,
1211 WEST, FL
33040

Mailing Address:

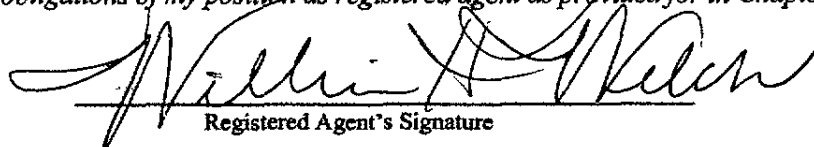
PO BOX 2847 824 NOR
MANITOCET, MA, 02534
VENICE, 34282

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

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

~~SHERREY WELCH~~ WILLIAM WELCH
Name
824 NORRIS AV, DU CATHERINE
Florida street address (P.O. Box NOT acceptable)
VENICE FL 33040
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, F.S..


Registered Agent's Signature

(CONTINUED)

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:

MGR

WILLIAM WELCH
121 CATHERINE ST.
1634 WEST FL

MGRM

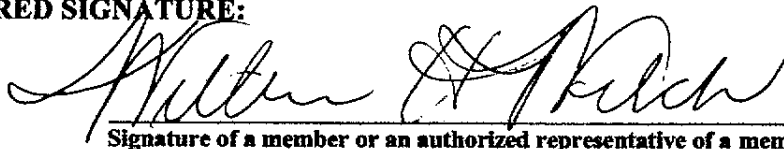
SHERREY WELCH 33040
824 NOKOMIS AV. SO.
VENICE, FL

34285

(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.)

WILLIAM H. WELCH

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)