## L05000058160

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	<del></del> .
Special Instructions to Filing Officer:	
<u></u>	_
Office Use Only	



600055524056

06/06/05--01025--012 \*\*125.00

SECKETAL STAT MITAHASSEE, ILORII

FILED

## TRANSMITTAL LETTER

TO: Registration Se Division of Co					
SUBJECT: Janus W	eprin, LLC				
		i Liability Company)	<del></del>		
The enclosed Articles o	f Organization and fee(s) are su	ubmitted for filing.			
Please return all corresp	ondence concerning this matte	r to the following:			
Henry Ja	anus				
<del></del>		Name of Person)	<del></del>		
<del></del>	(1	Firm/Company)	<del></del>		
			A SE	0	
6396 NW 2	3 Terrace			<u>ن</u>	
		(Address)	HASS	-6	==
_			m.	5 JUN -6 PM 2: 16	ᆵ
Boca	Raton, FL 33496	State and Zip Code)	F	्र	_
	(-1.3)		20/2 20/2	5 5	
For further information	concerning this matter, please	call:	<b>J</b>		
Henry Janus		at (561 ) 994-9299			
(Name	of Person)	(Area Code & Daytime Te	elephone Number)		
Enclosed is a check for	or the following amount:				
<b>3</b> \$125,00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Certificate of Statu Certified Copy (additional copy is encl	s &	
Regist	EET ADDRESS: tration Section	MAILING A Registration S	ection		

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

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 is:	:	
Janus Weprin, LLC		
ARTICLE II - Address: The mailing address and street address of the page.	rincipal office of the Limited Liabi	lity Company is:
Principal Office Address:	Mailing Address:	
6396 NW 23 Terrace	6396 NW 23 Terrace	
Boca Raton, FL 33496	Boca Raton, FL 33496	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the Henry Janus		gnature: 05 JUN -6  FIL  TALLAHASS
Name	:	
6396 NW 23 Terrace	(100 20 200 201)	<u>~</u> :;
Boca Raton, FL 33496	dress (P.O. Box <u>NOT</u> acceptable)	PH 2: 16 PH 2: 16 EÉ, FLORID
City, State,	-	<del></del>

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:

<u>Title:</u> "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member			
MOD	Henry Janus		
MGR		<del></del>	
	6396 NW 23 Terrace	<del></del>	
	Boca Raton, FL 33496		
MGR	Karen Weprin		
·-	6396 NW 23 Terrace		
	Boca Raton, FL 33496		
	<del></del>	<del></del>	
		<del></del>	
(Use attachment if necessary)			
NOTE: An additional article must be	added if an effective date is requested	1.	
REQUIRED SIGNATURE:			
REQUIRED SIGNATURE:			
/4/ 16			
Signature of a member or	an authorized representative of a member.		
(In acdordance with section	1 608.408(3), Florida Statutes, the execution		
of this document constitute that the facts stated herei	s an affirmation under the penalties of perjury		
Henry Janus			
	or printed name of signee		
1,7,7,0		TAS S	=
Filing Fees:			
\$125.00 Ciling For for Antidog of O	Aion and Degiseration	(作)	:
\$125.00 Filing Fee for Articles of Organiza of Registered Agent	tion and Designation	SST	ļ

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