# L05000067971

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	ısiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
<b></b>		
M	Office Use Onl	ly



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05 JUL -5 PH 2:57

# TRANSMITTAL LETTER

	ration Se on of Co	ction rporations				
SUBJECT: _		WAYNE'S WORLI	O ENTERPRIS	SES, LLC		
<del></del>		(Name of Limite	d Liability Con	ip <b>an</b> y)		<del></del>
The enclosed A	articl <b>es</b> of	f Organization and fee(s) are s	ubmitted for fil	ing.		
Please return a	ll corresp	ondence concerning this matte	er to the followi	ng:		
_			VE CUMMING	s		
		(	Name of Person)			
		WAYNE'S V	VORLD ENTE	RPRISES, LLC	<b>;</b>	
			Firm/Company)	····		
		225 K	INGSTON DF	)\/E		
	<u></u>	2201	(Address)	· · · · · · · · · · · · · · · · · · ·		<del>-</del>
			RS, FL 33905			70 Q
		(City	/State and Zip Co	ode)	<u> </u>	15 JU 1
For further info	rmation (	concerning this matter, please	call:			HASSE
WAYNE CUM	MINGS		at (_239	694-8225		市。 呈
	(Name	of Person)	(Area C	ode & Daytime To	elephone Number	2:57
Enclosed is a	check fo	r the following amount:			£.	Þ
<b>ð</b> \$125.00 Fili	ng Fee	☐ \$130.00 Filing Fee & Certificate of Status	Certified Co	Filing Fee & oppy oy is enclosed)	S160.00 Certificate of Certified Conditional cope	f Status & opy
		ET ADDRESS:		MAILING A		
		ration Section on of Corporations		Registration S Division of Co		
409 E. Gaines Street			P.O. Box 6327	7		
Tallahassee, Florida 32399			Tallahassee, F	lorida 32314		

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Compa	ny is:	
WAYNE'S WORLD ENTI	ERPRISES, LLC	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
225 KINGSTON DRIVE	225 KINGSTON DRIVE	
FT MYERS, FL 33905	FT MYERS, FL 33905	
ARTICLE III - Registered Agent, Regis	stered Office, & Registered Agent's Signature:	
The name and the Florida street address of	of the registered agent are:	
WAYNE O	CUMMINGS	•
	Name SS: OT	in.
225 KINGSTON DRIVE		*
Florida str	reet address (P.O. Box NOT acceptable)	2.7
FT. MYER	RS, FL 33905 P	
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.

(CONTINUED)

Page 1 of 2

# 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 WAYNE CUMMINGS 225 KINGSTON DRIVE FT MYERS, FL 33905 (Use attachment if necessary)

(050 4144012110110 11 1100000111)/

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.)

WAYNE CUMMINGS

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)

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**ARTICLE I - Name:** 

The name of the Limited Liability Company is:				
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ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
225 KINGSTON DRIVE	225 KINGSTON DRIVE			
FT MYERS, FL 33905	FT MYERS, FL 33905			
The name and the Florida street address of the WAYNE CUI  Na  225 KINGSTO  Florida street  FT. MYERS,	MMINGS ASSEED P			

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Registered Agent's Signature

(CONTINUED)

Page 1 of 2

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WAYNE CUMMINGS

Typed or printed name of signee

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