

W5000083223

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

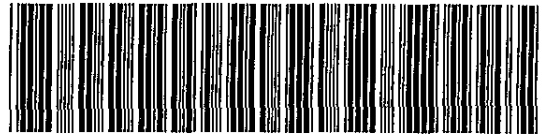
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W5-83223
JR

EFFECTIVE DATE
8-22-05

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Waltman Industries, 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:

Kimberly L. Waltman
(Name of Person)

Waltman Industries, LLC
(Firm/Company)

1216 Lexie Drive
(Address)

Crestview, Florida 32536
(City/State and Zip Code)

For further information concerning this matter, please call:

Kimberly L. Waltman at (850) 689-3044
(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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME:

The name of the Limited Liability Company is:

Waltman Industries, LLC

ARTICLE II - ADDRESS:

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

Principal Office Address

Waltman Industries, LLC
1216 Lexie Drive
Crestview, Florida 32536

Mailing Address:

Waltman Industries, LLC
1216 Lexie Drive
Crestview, Florida 32536

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

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

Kimberly L. Waltman
1216 Lexie Drive
Crestview, FL 32536

Having been named as registered agent and to accept services 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..

Kimberly L. Waltman
Registered Agent's Signature

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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 _____

Kimberly L. Waltman
1216 Lexie Drive
Crestview, Florida 32536

MGR _____

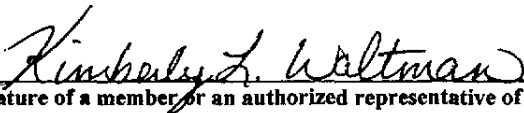
Lamar N. Waltman
1216 Lexie Drive
Crestview, Florida 32536

ARTICLE V - Effective Date:

The effective date of this/said Limited Liability Company is:

Monday, August 22, 2005
Day of the week, Month of the Year, Day of the Month, Year

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.)

Kimberly L. Waltman
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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