105000092359

(Re	questor's Name)	
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL.
(Bu	siness Entity Nam	ne)
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
•	3	ļ
-		ì
•		j
		ĺ

Office Use Only



800059069898

09/12/05--01010--010 **130.00

FILEU
2005 SEP 12 PM 2: 34
2005 SEP 12 PM 2: 34

▲ BRYAN SEP 2 0 2005



Ryan Realty

2149 Mariner Blvd. Spring Hill, Fl. 34608 352-666-5500





SEPT. 7, 2005

Florida Department of State Corporate Registration

Enclosed please find a signed Registered Agent form and a check for One Hundred Thirty Dollars (\$130.00). \$125.00 Registration Fee & \$5.00 Certificate of Status. Please send the Certificate of Status to the Registered Agent:

Charles F. Ryan, Jr. 3316 GULFWINDS CIRCLE HERNANDO BEACH, FL. 34607

Cimponolu.

Charles F. Ryan, Jr.



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
Wise Oul Investments, LLC	office of the Limited Liability Company is		
,	350		
ARTICLE II - Address:	Stine of the Vimited Viability of State and in		
The mailing address and street address of the principal office of the Limited Liability Company is			
Principal Office Address: Mailin	ng Address:		
3316 Gulfwinds Circle 331	6 Gulfwinds Circle		
	nando Beach, FL 34607		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:			
The name and the Florida street address of the registered agent are:			
Charles F. Ryan Tr			
Charles F. Ryan, Jr. Name			
00			
Florida street address (P.O. Box NOT acceptable)			
Hernando Beach FL 34607			
City, State, and Zip			
United hear remaders registered again and to accept to	mica of processes for the above stated limited		

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:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
MGRM	Robert Lawrence Ryan	
	1111 47 th St. SE. # A119 Everett WA 18203	
M G-RM	Stephen Cohen Ryan	
	Seattle, WA 98105	
	The state of the s	
(Use attachment if necessary)	FILE PRINCE	
NOTE: An additional article mus	st be added if an effective date is requested.	
REQUIRED SIGNATURE:	ORIO A	
Steph	Coha Ry	
Signature of a mem	ber or an authorized representative of a member.	
(In accordance with s of this document con that the facts stated	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury therein are true.)	
Stephen	Cohen Ryan Typed or printed name of signee	
Filing Fees:		
C125 00 Filing Footor Articles of Or	contration and Decignation	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)