

LOS0000121308

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

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12/07/05--01015--024 **130.00

EFFECTIVE DATE

12/22/05

FILED
05 DEC 20 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 21 2005

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WINDCROFT INVESTMENTS L.L.C.
(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:

NORMAN J. WILSON JR.

(Name of Person)

(Firm/Company)

1632 S. BAYSHORE CT. #302

(Address)

MIAMI, FL 33133

(City/State and Zip Code)

For further information concerning this matter, please call:

NORMAN J. WILSON JR.

(Name of Person)

at (305)

858-0212

(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)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 12, 2005

NORMAN J. WILSON JR.
1632 S. BAYSHORE COURT #302
MIAMI, FL 33133

SUBJECT: WINDCROFT INVESTMENTS, L.L.C.
Ref. Number: W05000054632

We have received your document for WINDCROFT INVESTMENTS, L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

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) 245-6067.

Neysa Culligan
Document Specialist

Letter Number: 905A00071481

EFFECTIVE DATE

12/22/05

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WINDCROFT INVESTMENTS L.L.C.

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

1632 S. BAYSHORE CT. #302

MIAMI, FL 33133

Mailing Address:

1632 S. BAYSHORE CT. #302

MIAMI, FL 33133

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

SHARON R. WILSON

Name

1632 S. BAYSHORE CT. #302

Florida street address (P.O. Box **NOT** acceptable)

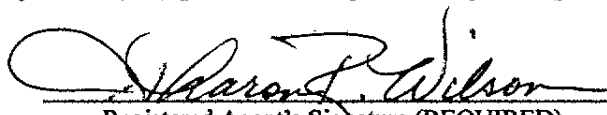
MIAMI, FL 33133

FL

City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 (REQUIRED)

(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

Name and Address:

MGR

NORMAN J. WILSON JR.

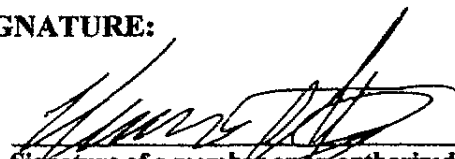
1632 S. BAYSHORE CT. #302

MIAMI, FL 33133

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: DECEMBER 22, 2005 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

NORMAN J. WILSON JR.

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)

FILED
05 DEC 20 AM 10:36
TALLAHASSEE, FLORIDA
SECRETARY OF STATE