L060000016/25

2006 FEB 13	F 12. 00
SECRETARY TALLAHASSE	DE STATE , FLORIDA
(Requestor's Name)	
(Address)	. 000064633500
(Address)	000004033300
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	01/31/0601028012 **155.00
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	·
Special Instructions to Filing Officer:	
W06-6431	

Office Use Only

AL



FILED

ZOUG FEB 13 P 12: 08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 10, 2006

ALAN JON WIMPY P.O. BOX 97 TERRA CEIA, FL 34250

SUBJECT: WGHT LLC

Ref. Number: W06000006431

We have received your document for WGHT LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

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) 245-6094.

Letter Number: 406A00009605

Agnes Lunt Document Specialist



Appalachian Material Service, Inc.

9321 Moccasin Wallow Rd. Parrish, Florida 34219 P.O. Box 97 Terra Ceia, FL 34250 Phone: 941-776-9706 D

TO:18502456030

2006 FEB 13 P 12: 08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

February 13, 2006

Attention: Agnes Lunt

Re: WGHT LLC

Dear Ms Lunt,

Please accept this fax with the missing information for the address of the registered agent for WGHT LLC. I realized that this area was left blank when submitting the original documentation and I am assuming that is why it appears as a rejected filing on line. I can be reached at the address and numbers above should you require further information.

Thank you for you assistance.

Respectfully,

President

COVER LETTER

FILED

TO: Registration Section Division of Corporations 2006 FEB 13 P 12: 08 SUBJECT: The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Alan Jon Winney
(Name of Person) Appalachian Material Service, Inc. (Firm/Company) P.O. Box 97

(Address) Terra Ceia Fl 34250 (City/State and Zip Code) For further information concerning this matter, please call: at (941) 737-1297 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount: \$155.00 Filing Fee & \$160.00 Filing Fee, ■ \$125,00 Filing Fee ■ \$130.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy

Mailing Address

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

Street/Courier Address

(additional copy is enclosed)

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

Certified Copy

(additional copy is enclosed)

. . . *

FILED

A POTT OF THE COLUMN AS A SECOND AS A SECO	ORIDA LIMITED LIABILITY COMPANY SECRETARY OF STATE TALLAHASSEE, FLORIDA
ARTICLES OF ORGANIZATION FOR FI	CORIDA LIMITED LIABILITY COMPANY "" US
ADTICLE L. Nome.	TALLAHASSEF, FI OPIO
The name of the Limited Liability Company is:	LORIDA
The name of the Emilieu Elability Company is:	•
3.4.6.4.	
WGHT LLC (Must end with the words "Limited Liability Company, "Limit	red Company" or their abhoryinting "I I C" or "I C ")
	ob bompany of their toorestation beet, of their,
ARTICLE II - Address:	Standard Affice of the Annual Control of the
the maining address and street address of the pi	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
	PA B4 97
	P.O. Box 97 Terra Ceia, FL 34250
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the information of	stered Agent. You must designate an individual or another
Florida street ad	dress (P.O. Box <u>NOT</u> acceptable)
Parrish City, State,	FL 34219 and Zip
liability company at the place designated in registered agent and agree to act in this capacity statutes relating to the proper and complete proper are complete proper and complete proper are complete proper and complete proper are complete proper are complete proper and complete proper are complete prope	accept service of process for the above stated limited this certificate, I hereby accept the appointment as the further agree to comply with the provisions of all erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S
No Summer of Sum	

(CONTINUED) Page 1 of 2

SECRETARY OF STATE TALLAHASSEE, FLORIDA Jon Wimpy Lar
Jon Wimpy
97
_
'ela, F1 34250
anot be more than five business days prior
7. ————————————————————————————————————
representative of a member.
pepresentative of a member. orida Statutes, the execution under the penalties of perjury
wida Statutes, the execution
orida Statutes, the execution under the penalties of perjury
mation :.)

ARTICLE IV- Manager(s) or Managing Member(s):