## 101000021516

(Requestor's Name)
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PICK-UP WAIT MAIL
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## **COVER LETTER**

TO:	Registration Se Division of Co				
SUBJE	CCT: Harve	y Wayne LLC (Name of Limiter	I Liability Compa	<u></u>	
		( Amino OI , District	- Zimenie, Gompo	~, /	
The en	closed Articles o	f Organization and fee(s) are so	ubmitted for filing	g.	
Please	return all corresp	ondence concerning this matte	r to the following	5	
	Harvey W	/ayne			
	<del>,,,,</del>	0	Vame of Person)		
	Harvey W	/ayne LLC		_	
	•••	(	Firm/Company)		
	7259 Via	Palomar			
			(Address)		
	Boca Ra	ton, FL 33433			
		(City)	State and Zip Code	<del>:</del> )	
For fur	ther information	concerning this matter, please	call:		
Harv	ey Wayne	<b>;</b>	a, 561	、447-40	53
		of Person)	at ( 561 (Area Cod	c & Daytime T	elephone Number)
Enclos	ed is a check fo	or the following amount:			,
\$125	i.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy)	y	\$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	Registrati Division Clifton B 2661 Exe	ourier Addression Section of Corporational ding	ris · Circle

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company	r <b>is:</b>	
Harvey Wayne LLC		<b>~</b> .
(Must end with the words "Limited Liability Company, "L	imited Company" or their abbreviation "ELC," or "E.C.,")	
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:	
7259 Via Palomar	7259 Via Palomar	
Boca Raton, FL 33433	Boca Raton, FL 33433	
	ered Office, & Registered Agent's Signature: tegistered Agent. You must designate an individual or another	
The name and the Florida street address of the	he registered agent are:	,
The Managerano HAA	ever WayNE 22	
7259 Via Palomar	t address (P.O. Box NOT acceptable)	<u>د</u> لا
Florida street	t address (P.O. Box NOT acceptable)	Ĩ

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..

FL

Cîty, State, and Zîp

Registered Agent's Signature (REQUIRED)

Boca Raton, FL 33433

(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:

		Name and Address:
"MGR" = Mar	•	
"MGRM" = N	Managing Member	
MGR		Harvey Wayne
· · · · · · · · · · · · · · · · · · ·		7259 Via Palomar
		Boca Raton, FL 33433
	<del></del> ,	
		**************************************
(Use attachme	ent if necessary)	
	••	**************************************
LE V: Effective	ve date, if other than the	date of filing: February 17, 2006 . (OPTIONA
LE V: Effective date is	ve date, if other than the d listed, the date must be	date of filing: February 17, 2006 . (OPTIONA specific and cannot be more than five business day
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LE V: Effective date is days after the	ve date, if other than the clisted, the date must be date of filing.)  SIGNATURE:	specific and cannot be more than five business day  fury Waynesser an authorized representative of a member.
LE V: Effective date is days after the	ve date, if other than the clisted, the date must be date of filing.)  SIGNATURE:  Signature of a member of this document constit	especific and cannot be more than five business day  for an authorized representative of a member.  tion 608.408(3), Florida Statutes, the execution of the penalties of perfury.
LE V: Effective date is days after the	ve date, if other than the clisted, the date must be date of filing.)  SIGNATURE:  Signature of a member (In accordance with sect of this document constitutat the facts stated be	especific and cannot be more than five business day  for an authorized representative of a member.  tion 608.408(3), Florida Statutes, the execution of the penalties of perfury.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.90 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)