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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: W. Patterson & Associates, L. (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:	
Wanita S Patterson	
(Name of Person)	
W. Patterson & Hissociates (, C,
S. F. 1 (2) A- a (a a) Divis	
(Address)	
Orlando, F/ 32803	·)
(City/State and Zip Code)	N SS
(City/State and Zip Code) For further information concerning this matter, please call: Wanita S. Patterson at 407 963-5596 (Name of Person) (Area Code & Daytime Telephone Number)	CRETATION OF THE
Wanita S. Patterson at 407 963-55.96 = (Area Code & Daytime Telephone Number)	CORPO SALAS
(Name of Person) (Area Code & Daytime Telephone Number)	RATE
Enclosed is a check for the following amount:	SNO
\$125.00 Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)}	
Mailing Address Registration Section Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liab	ility Company is:	:		
(Must end with the words "Limited Lia	rson {	Associate	s, (, c.	, —
(Must end with the words "Limited Lia	bility Company, "Limit	ted Company" or their abbreviation	"LLC," or "L.C.,")	8 NS
ARTICLE II - Address: The mailing address and stree				
Principal Office Address:		Mailing Address:	_	T PH
2510 Aralea Oncando, F	Delve 1-803	DRIGHOU DRIGHOU	lea Dell , Fl , 32803	WATER STATE OF THE
ARTICLE III - Registered A (The Limited Liability Company cannot business entity with an active Florida	t serve as its own Regis			
The name and the Florida stre	et address of the	registered agent are:		
_	•	Patterson,)	08/01/010
	o Azale	ea Drive		
•		Idress (P.O. Box NOT acceptable	le)	
<u>Orla</u>	City, State,	$_{\rm FL}$ 32803 and Zip		
Having been named as regist	ered agent and to	accept service of process fo	or the above state	d 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:

<u> 11tte:</u>	Name and Address:
"MGR" = Manager	of User
"MGRM" = Managing Member	
President Manager	Wanita S. Patterson 1 3510 Azalea Delve
1/1/e	Oclanco, F1 32803 3 82
Vice President <u>managing</u> member	- Nicole S. Straite 2 5 5 Azalea Deve
Secretary	Orlando, F/ 32803
Secretary Marketing <u>managing</u> appember	Erika C Straite - 2510 Azalea Drive Orlando (F. 32803
Tveäsurer <u>managingme</u> mber	Michela C. Straite 25/0 Aralea Drive Orlando, fi 32803

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 1. Hugust 200. 6PTIONAL) (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.)

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)