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. (Re	equestor's Name)	
(Address)		
(Ad	ldress)	
(City/State/Zip/Phone #)		
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TRANSMITTAL LETTER .

(Name of Person)	(Area Code & Daytime Telephone Number)	
Ryanne Sherman	at (_888)664.6263	
For further information concerning the	his matter, please call:	
	(City/State and Zip Code)	
	(City/State and Zip Code)	
	Tappan, NY 10983	
	(/144/050)	
	(Address)	
	101 Main Street, Suite One	
	(Firm/Company)	
	Start-A-Business.com, Inc.	
•	(Name of Person)	
<u> </u>	Ryanne Sherman	
Please return	n all correspondence concerning this matter to the following:	
The enclosed Articles of Organizatio	on and fee(s) are submitted for filing.	
	(Name of Limited Liability Company)	
SUBJECT: Wahoo Marke		
TO: Registration Section Division of Corporations		

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

• • •	
Wahoo Marketing, LLC	·
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
5520 PGA Blvd Suite 212	5520 PGA Blvd Suite 212
Palm Beach Gardens, FL 33418	Palm Beach Gardens, FL 33418
ARTICLE III - Registered Agent, Registered Communication of the registered address of the regist	gistered agent are: 上音
	gistered agent are:
The name and the Florida street address of the re-	gistered agent are: ALLAHASSEE -9
The name and the Florida street address of the resolvent Name Name 1023 Shady Lakes Circle	FILED ALLANASSEE, FLOR
The name and the Florida street address of the re-	FILED ALLANASSEE, FLOR
The name and the Florida street address of the resolvent Name Name 1023 Shady Lakes Circle	gistered agent are: ALLANSSEE FLORID Box NOT acceptable)

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, Florida Statutes..

Nick Van Nice

By:

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Nick Van Nice
	1023 Shady Lakes Circle
·	Palm Beach Gardens, FL 33418
	
	·
·	
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Ve menes	
Signature of a member or an a	uthorized representative of a member.
(In accordance with section 608.	.408(3), Florida Statutes, the execution affirmation under the penalties of perjury
Ryanne Sherman	
Typed or pri	inted name of signee

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)