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(Requestor's Name)				
(Address)				
(Ad	ldress)			
(City/State/Zip/Phone #)				
				
☐ PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
, (Do	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			
	,g ++			

Office Use Only



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SECRETARY OF STATE SECRETARY OF CORPORNIONS

COVER LETTER

TO:	Registration Se Division of Co					
SUBJE	ECT: WTM	Tyme, Entertainme		any)		
		·				
The en	closed Articles of	f Organization and fee(s) are s	ubmitted for filin	g.		
Please	return all corresp	ondence concerning this matte	er to the following	g :		
	Charles N	И. Britt, III, Attorne	ev at Law			06 Sign
			Name of Person)	 ,		PG \$\$
	Law Offic	e of Charles M. B	Britt. III			23
			Firm/Company)			圣瓷
520 12th ST W, Suite 203A			06 DCT 23 AM 8: 25			
			(Address)			ਰਾ ਹੈ
	Bradento	on, Florida 3420	5			
			State and Zip Cod	e)		 .
For fur	ther information	concerning this matter, please	call:			
Cha	rles M. Bri	tt, III	at (941	, 747-44	40	
	(Name	of Person)		le & Daytime T	elephone Number)	
Enclos	ed is a check fo	or the following amount:				
\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 F Certified Cop (additional copy	•	\$160.00 Filing Certificate of State Certified Copy (additional copy is end	us &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton E 2661 Exc	ourier Addression Section of Corporation Building ecutive Center see, FL 32301	ns	

RIICLES OF ORGANIZATION FOR FL	URIDA LIVITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	d Company" or their abbreviation "LLC," or "L.C.,")
WTM Tyme, Entertainment, L.L.C.	.
(Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5330 1st St.	520 12th St. W, Suite 203A
Bradenton, Florida 34203	Bradenton, Florida 34205
(The Limited Liability Company cannot serve as its own Registed business entity with an active Florida registration.) The name and the Florida street address of the registration.	
Charles M. Britt, III, Attorn	ney at Law
Name	
520 12th St. W., Suite 2	:03A
	ress (P.O. Box NOT acceptable)
Bradenton	FL 34205
City, State, a	
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as h. I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered 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):

4 4 E

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Margaret L. Harris 5330 1st St. Bradenton, FI 34203
Member	Wayne P. Harris 5330 1st St. Bradenton, FI 34203
(Use attachment if necessary)	
	the date of filing: (OPTIONAL) t be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	. [1]
Signature of a mer	nber or an authorized representative of a member.
(In accordance with	section 608.408(3), Florida Statutes, the execution

Margaret L. Harris

Typed or printed name of signee

of this document constitutes an affirmation under the penalties of perjury

Filing Fees:

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

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)