P.01 Page 1 of 1

Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000279182 3)))



H0B0002791823ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP

Account Number : 075500004387 Phone : (813)229-7600

Fax Number : (

: (813)229-1660

RECEIVED

OG NOV 20 AM II VISION OF TARPO

ELORIDA/FOREIGN LIMITED LIABILITY CO.

JWD Investment LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

11000000

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AMPTOT D.Y. Mounts	
ARTICLE I - Name: The name of the Limited Liability Company	r is:
IWD Investments LLC	
(Must end with the words "Limited Liability Company, "L	imited Company" or their abbreviation "LLC," or "L.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:
231 Bast Beach Drive	231 East Beach Drive
Panama City, Florida 32401	Panama City, Florida 32401
business entity with an active Florida registration.) The name and the Florida street address of the John Name and the Florida street address of the John	W. Darreb ADDRESS Property Control of the Control o
Florida street address (P.O. Box NOT acceptable)	
	y, Florida 32401
City, State, and Zip	
liability company at the place designated registered agent and agree to test in this cape statutes relating to the proper and complete accept the obligations of my position as reacted the control of the proper and complete accept the obligations of my position as reacted the control of the proper and complete accept the obligations of my position as reacted the control of the proper and complete accept the obligations of my position as reacted agent's Signature and the place designated agent's Signature and the place designated agent and agree to test in this cape accept the obligations of my position as reacted agent's Signature accept the proper and complete accept the obligations of my position as reacted agent's Signature accept the proper and complete accept the obligations of my position as reacted accept the obligations of my position accept the obligations of my position accept the obligations accept the obligations are accept the obligations of my position accept the obligations accept the oblig	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all e performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S

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" - Manager "MGRM" = Managing Member John W. Darrah MGRM 231 East Beach Drive Panama City, Florida 32401 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL) (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.) REOUTRED SIGNATURE: Signature of a member or an authorized representative of a member. Accordance with section 608.408(3), Plotida Statutes, the execution this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) John W. Darrah Typed or printed name of signee \$125.00 Filing Fee for Articles of Organization and Designation

Page 2 of 2

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