Division of Corporations Public Access System

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Division of Corporations

: (850)205-0383

Account Name

: BLUMBERG/EXCELSIOR CORPORATE SERVICES,

Account Number : 075350000353

: (212)431-5000

Fax Number

: (212)431-1441

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Willa, 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Wille, LLC	*		
ARTICLE II -	Address:		
The mailing ad	iress and street address of th	ne principal office of the Limited	Liability Compar
Principal Offic	e Address:	Mailing Address:	SEC
15405 Fenton P	ace	15405 Fenton Place	
Tampa, FL 336	7	Tamps, FL 33647	
			<u> </u>
	Westerned Angus Desire	and Office & Desirtand Age	TO COMMENTS
ariicle III	- Registered Agent, Regist	ered Office, & Registered Age	m sommente
The name and the Florida street address of the registered agent arc:			
	Daniel Frazier	ieme	
	•	Thank I'm	
	15405 Fenton Place		1
		et address (P.O. Box <u>NOT</u> acceptable)	·
		et address (P.O. Box <u>NOT</u> 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, F.S..

(CONTINUED)

Page 1 of 2

Fax:888-692-9256

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

Tampa, FL 33647	
	*
	(0)
	-6
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	خرز میر شرور
(Use attachment if necessary)	EL C
NOTE: An additional article must be added if an effective date is requested.	Tions of
REQUIRED SIGNATURE:	S. Par
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.)	
JUSTIN T. REED, Organizor Typed or printed name of signee	

Filing Fees;

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.08 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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