## L07000042921

| (Re                                     | equestor's Name)   |           |
|---|--------------------|-----------|
| (Ad                                     | dress)             |           |
| (Ad                                     | dress)             | ·         |
| (Cit                                    | ty/State/Zip/Phone | · #)      |
| PICK-UP                                 | WAIT               | MAIL      |
| (Bu                                     | siness Entity Nam  | ne)       |
| (Document Number)                       |                    |           |
| Certified Copies                        | _ Certificates     | of Status |
| Special Instructions to Filing Officer: |                    |           |
|   |                    |           |
|   |                    |           |
|   |                    |           |
|   |                    |           |
|   |                    |           |

Office Use Only



100097135941

04/20/07--01013--019 \*\*125.00

2001 APR 20 P 2: 53
SECRETARY OF STATE

Æ

## COVER LETTER

| TO: Registration Section Division of Corporations  |
|--|
| SUBJECT: WEK Investments, LLC (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:  |
| Elliot S. Koolik<br>(Name of Person)   |
| (Name of Person)  Koolik Group Lealty  (Firm Company)  |
| 2499 Clades Road Suite 203 (Address) FF 3  |
| BOCA RATIN Florida 3345/ \$ 7 (City/State and Zip Code)  |
| / (City/State and Zip Code)  |
| For further information concerning this matter, please call:   |
| Ellist S. Koolik at (J61) 393- 979 927  (Name of Person) (Area Code & Daytime Telephone Number)  |
| Enclosed is a check for the following amount:  |
| \$125.00 Filing Fee \$\bigcup \text{\$130.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)   |
| Mailing Address Registration Section Division of Corporations P.O. Box 6327  Tallahassee, FL 32314  Street/Courier Address Registration Section Division of Corporations Division of Corporations Clifton Building Tallahassee, FL 32314 |

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability Company is:  |  |  |
|--|--|--|
| WEK Investments, LLC.  (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")   |  |  |
| ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:  |  |  |
| Principal Office Address:  Mailing Address:  |  |  |
| 1499 Clades Rd # 103 2499 Glades Rd # 103 BOCA RATON, FLORIDA BOCA RATON, FLORIDA 33431  |  |  |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:  (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individuated another business entity with an active Florida registration.)  The name and the Florida street address of the registered agent are:  |  |  |
| Elliot S. Koolik The D   |  |  |
| 2499 Glades Road Suite 70 85 Florida street address (P.O. Box NOT acceptable)  |  |  |
| BOCA RATON FL 3343/ City, State, and Zip   |  |  |
| 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

Registered Agent's Signature (REQUIRED)

## 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:   |
|--|---|
| MG R   | Elliot S. Loolik<br>303 HARRING for Drive<br>BOCO RATON, FLORIDA 33490  |
| ······································   |   |
| · · · · · · · · · · · · · · · · · · ·  | ZE<br>TAL.  |
|  | ORE DARY 20   |
| (Use attachment if necessary)  | P 2: 5  |
| ARTICLE V: Effective date, if other than the confidence of the date of the dat | date of filing: OPTIONAL) specific and cannot be more than five business days prior                                   |
| REQUIRED SIGNATURE:  |   |
| ٠ ر  | or an authorized representative of a member.  |
| of this document constitution that the facts stated he   | tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.) |
|  | ped or printed name of signee   |

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)