# 07000102473

(Re	equestor's Name)	<del>-</del> ,
(Ac	ldress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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# **COVER LETTER**

TO:	Registration S Division of Co				
SUBJ	<sub>rect:</sub> Wake	Park Project LLC			
		(Name of Limited	Liability Compa	nny)	
The e	nclosed Articles o	f Organization and fee(s) are su	ibmitted for filing	3.	
Please	e return all corresp	ondence concerning this matte	r to the following	;	
	Patrick W.	Panakos			
		1)	Name of Person)		
					9 0 0
		(1	Firm/Company)		7 OC
	19454 E (	Colonial Drive	(A.11		
	Orlando, i	FL 32820	(Address)		07 OCT -8 PM 3: 02
		,	State and Zip Code	:)	
For fu	orther information	concerning this matter, please of	call:		, ,
Pat	rick W. Par	akos	at ( 407	353-4286 e & Daytime Telepho	
	(Name	of Person)	(Area Cod	e & Daytime Telepho	one Number)
Enclo	sed is a check for	or the following amount:			
\$125.00 Filing Fee \$130.00 Filing Certificate of		\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Co (additional copy	py C y is enclosed) C	160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Address on Section of Corporations uilding ecutive Center Circ ee, FL 32301	le

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Wake Park Project LLC	
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	9
The mailing address and street address of the prin	ncipal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
19454 E Colonial Drive	PH 3: 02
Orlando, FL 32820	Same
	02
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the registration.	red Agent. You must designate an individual or another
Patrick W. Panakos	
Name	<del></del>
19454 E Colonial Driv	/e
Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)
Orlando, FL 32820	FL
City, State, an	d Zip
liability company at the place designated in th	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as  I further agree to comply with the provisions of all

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
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:

"MGR" = Man	-		
"MGRM" = M	anaging Member		
MGRM		Patrick W. Panakos	
	<u> </u>	19454 E Colonial Drive	
		Orlando, FL 32820	= .
MBR		Matthew C. Hickman	or or
	<del></del>	2021 N Forest Court	
		Canby, OR 97013	- 10 C
			P
	<u></u>		PH 3: 02
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(Use attachmer	nt if necessary)		
<b>(</b>	······································		
CLE V: Effectiv	e date, if other than th	e date of filing:	(OPTIONAL)
		be specific and cannot be more than fi	
	date of filing.)	-	
90 days after the			
90 days after the			
·			
90 days after the  REQUIRED S	SIGNATURE:		
90 days after the  REQUIRED S	SIGNATURE:	2 (	

Patrick W. Panakos

that the facts stated herein are true.)

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution 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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)