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SECRETARY OF STATE

# **COVER LETTER**

10:	Division of Corpor						
SUBJE	CCT: WPR Cor	nsulting, LLC					
5025		(Name of Limited	Liability Compa	ny)			
The en	closed Articles of Org	ganization and fee(s) are sul	bmitted for filing	<b>.</b>			
Please	return all corresponde	ence concerning this matter	to the following:	:			
	Dana L. Roel	ing					
			ame of Person)				
			irm/Company)				
	.=====================================		mil/Company)				
	17307 Carriage Way						
			(Address)				
	Odessa, FL		State and Zip Code	<u> </u>			
		(City).	State and Zip Code	;)			
For fu	ther information cond	cerning this matter, please of	eall:				
Dana L. Roeling			at ( 813	263-682			
	(Name of P		(Area Cod	e & Daytime Tele	phone Number)		
Enclo	sed is a check for th	e following amount:					
▼\$125.00 Filing Fee □\$130.00 Filing Fee & Certificate of Status		\$155.00 Filin Certified Co (additional cop	ру	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	F I F	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Registrat Division Clifton E 2661 Ex	ourier Address ion Section of Corporations Building ecutive Center ( see. FL 32301			

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:	
WPR Consulting, LLC (Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
17307 Carriage Way Odessa, FL 33556	17307 Carriage Way Odessa, FL 33556
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	ered Agent. You must designate an individual or another
The name and the Florida street address of the re  Dana L. Roeling  Name	R20 HASSE
17307 Carriage Way Florida street add Odessa, FL 33556 City, State, a	ress (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..

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>	Name and Address:	
"MGR" = Manager "MGRM" = Managing Mo	ember	
MOMM — Managing Mi	SHIOCI	
MGRM	Dana L. Roeling	
	17307 Carriage Way	
	Odessa, FL 33556	
(Use attachment if necess	ary)	
•		
RTICLE V: Effective date, if or	ther than the date of filing: As Filed (OPTIONAL)	
	date must be specific and cannot be more than five business days prior	r
o or 90 days after the date of fili	ng.)	
REQUIRED SIGNATU	RE:	
	ALS: 08	
	A 1 1 0 5 5 5 5	C A
	Dana O. Kaeline   E ? =	، خالکی الاکامی
Signatu	re of a member or an authorized representative of a member.	
(In accord	rdance with section 608.408(3), Florida Statutes, the execution	T
of this d	ocument constitutes an affirmation under the penalties of perjury the facts stated herein are true.)	
	a L. Roeling	
Danie	Typed or printed name of signee	
	Typed of 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)