L080000078221

(Requestor's Name)			
(Address)			
(Address)			
(ChulChaba 17) (Diama and			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
1 3731°			
1708			
A. LUNT			
A. LUNT AUG 15 2008			
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SECRETARY OF STATE
ALLAHASSEE, FI CRIETA

EXAMINE Giffice Use Only



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 7, 2008

WARREN S. HALL 4220 WOODLARK DR. TAMPA, FL 33624

SUBJECT: WBM ENTERPRISES LLC

Ref. Number: W08000037315

We have received your document for WBM ENTERPRISES LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 008A00045054

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:		UBM Enter	orises LLC
	(ivanie of Limited	Liability Company)	
The enclosed Articles o	f Organization and fec(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Warren S	5. Hall	
	(N	ame of Person)	
	JBM Enter	prises L	LC
	(F)	m/Company)	ZIDB
	4220 Wood	lack no	AR E T
	100-0-00	(Address)	JARY SSE
	Tama F	1 33624	
	(City/S	tate and Zip Code)	Sz w
For further information	concerning this matter, please ca	. 11.	10A 28
ror turner information			
_ Been	ida 3. Hall "	t (<u>813</u>) <u>4C 4-</u> (Area Code & Daytime Tele	6061
(Name	of Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$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	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
(Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	cipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4920 Wordlark Or Tampu Fl 33624	4220 Wordlack Pr Tampu Fl 33624
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 reg	
Tampa FI	ark Dr. Siss (P.O. Box NOT acceptable)
City, State, and	1 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.

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: Title: "MGR" = Manager "MGRM" = Managing Member MGRM" = Manager MGRM" = Managing Member MGRM" = Manager MGRM" = Managing Member MGRM" = Managing Member is as follows: MGRM" = Manager MGRM" = Manager MGRM" = Manager MGRM" = Manager MGRM" = Managing Member is as follows: MGRM" = Manager MGRM" = Manager MGRM" = Managing Member MGRM" = Manag

REQUIRED SIGNATURE:

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.)

Typed 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)