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(Requ	estor's Name)	<u></u>
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(City/S	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busir	ness Entity Na	me)
(Docu	ment Number)
Certified Copies	Certificate	s of Status
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CONTRACT OF STATE

B SEP 22 AM 8: 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIARRITY COMPANY

RIICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPANY		
ARTICLE I - Name:			
The name of the Limited Liability Company is:	A		
The d Whelan Group, L.L.C.			
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:		
937 Mandarin Isle; Ft. Lauderdale, FL 33315	937 Mandarin Isle; Ft. Lauderdale, FL 33315		
·			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)			
The name and the Florida street address of the re	egistered agent are:		
Daniel J. Whelan			
Name			
937 Mandarin Isle			
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)		
Fort Lauderdale, FL	33315		
City, State, a	nd Zip		
	accept service of process for the above stated limited his certificate, I hereby accept the appointment as		
statutes relating to the proper and complete pe	y. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and		
accept the obligations of my position as regis	stered agent as provided for in Chapter 608, F.S		
	1.0/1		
Registered Agent's Signat	ure (REQUIRED)		
	22 22		

(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	Name and Address:
"MGRM" = Managing Member	
MGR	Daniel J. Whelan
	937 Mandarin Isle; Ft. Lauderdale, FL 33315
MGRM_	Tracey Whelan
	937 Mandarin Isle; Ft. Lauderdale, FL 33315
	
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: September 19,2008. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Daniel J. Whelan

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)

08 SEP 22 AM 8: 32