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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

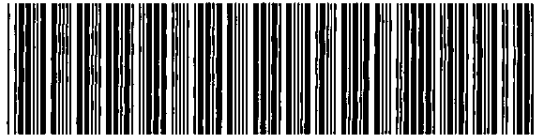
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03 NOV 20 AH 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

M. THOMAS

NOV 21 2008

EXAMINER

COVER LETTER

TO:

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: **JAMES A. WEINKLE, P.L.**
(Name of Limited Liability Company)

Ref. Number: W08000051405

Enclosed please find the Articles of Organization for filing. I have made the corrections required by your letter of November 12, 2008, a copy of which is enclosed. I have previously forwarded to you a check totaling \$160.00.

Please return all correspondence concerning this matter to the following:

JAMES A. WEINKLE, Esq.

(Name of Person)

JAMES A. WEINKLE, P.L.

(Firm/Company)

4925 COLLINS AVENUE, UNIT 5-J

(Address)

MIAMI BEACH, FLORIDA 33140-2756

(City/State and Zip Code)

For further information concerning this matter, please call:

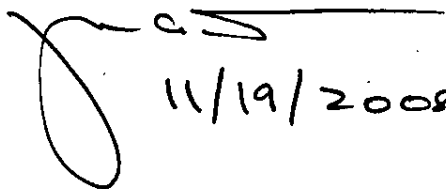
JAMES A. WEINKLE at

(305) 903.5353

(Name of Person)

(Area Code & Daytime Telephone Number)

\$160.00 Filing Fee, Certificate of Status & Certified Copy previously forwarded to Division of Corporations (additional copy is enclosed)


11/19/2008

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09 NOV 20 AM 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 12, 2008

JAMES A. WEINKLE
4925 COLLINS AVENUE, UNIT 5-J
MIAMI BEACH, FL 33140-2756

SUBJECT: JAMES A. WEINKLE, PL
Ref. Number: W08000051405

We have received your document for JAMES A. WEINKLE, PL and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A brief description of the entity's nature of business must be included in the document.

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) 245-6097.

Marsha Thomas
Regulatory Specialist II

Letter Number: 008A00056901

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08 NOV 20 AM 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

JAMES A. WEINKLE, P.L.

(Must end with the words "Limited Liability 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:

4925 Collins Avenue, Unit 5-J
Miami Beach, Florida 33140-2756

Mailing Address:

4925 Collins Avenue, Unit 5-J
Miami Beach, Florida 33140-2756

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 individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

JAMES A. WEINKLE

Name

4925 COLLINS AVENUE, UNIT 5-J

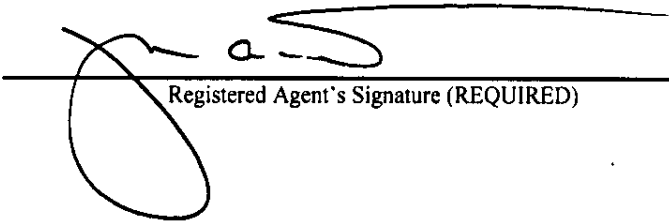
Florida street address (P.O. Box NOT acceptable)

Miami Beach, Florida 33140-2756

City, State, and Zip

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGMR

James A. Weinkle

4925 Collins Avenue, Unit 5-J

Miami Beach, Florida 33140-2756

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (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.)

ARTICLE VI – Description of Nature of Business of Entity:

Consulting on legal, strategic and business matters and practice of law.

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.)

JAMES A. WEINKLE

Typed or printed name of signer

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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA