

L09000045988

James Simpson I  
(Requestor's Name)

2926 Salem Rd  
(Address)

Havana Fla, 32333  
(Address)

(City/State/Zip/Phone #)

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DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

• STATE OF FLORIDA       )  
COUNTY OF LEON        )

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09 MAY 12 PM 4:07

ARTICLES OF ORGANIZATION OF A LIMITED LIABILITY COMPANY

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

THE SUBSCRIBERS to these Articles of Organization of a Limited Liability Company, all natural persons competent to contract, hereby elect to form a Limited Liability Company under the laws of the State of Florida.

#### ARTICLE I. - NAME

The name of the Limited Liability Company shall be Watt Mizer, LLC, and its principal office is to be located in Gadsden County, Florida.

#### ARTICLE II. - PRINCIPAL OFFICE

This limited Liability Company will have as its principal office address: 2926 Salem Rd, Havana, FL 32333-3865 and will exist in perpetuity, unless voluntarily dissolved, or dissolved by operation of law.

#### ARTICLE III. - PURPOSE

The purposes of this Limited Liability Company shall be to transact any and all lawful business under the Laws of the State of Florida.

#### ARTICLE IV. - REGISTERED AGENT

The Limited Liability Company hereby appoints James L. Simpson, 2926 Salem Rd, Havana, FL 32333-3865, to serve as registered agent, and who by signing below affirms that he is

. . \*familiar with and accepts the obligations of this position.

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ARTICLE V. - AMENDMENTS TO ARTICLES 09 MAY 12 PM 4:07

These Articles of Organization may be amended from time to time as may be required in compliance with Florida Statutes. TALLAHASSEE, FLORIDA

ARTICLE VI. - EFFECTIVE DATE

The effective date of this Organization is May 11, 2009, or the effective date as determined by the State of Florida if subsequent to May 11, 2009.

ARTICLE VII. - MEMBERS

The members of this Limited Liability Company are as follows:  
James Simpson, Managing Member, 2926 Salem Rd, Havana, FL 32333-3865.

IN WITNESS WHEREOF, I, the aforementioned Registered Agent and Managing Member, have hereunto affixed my hand and seal this 11th Day of May, A.D. 2009.

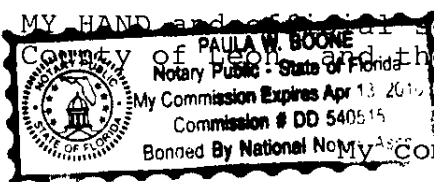
*James L. Simpson*  
James L. Simpson

STATE OF FLORIDA)  
COUNTY OF LEON )

ACKNOWLEDGEMENT

I HEREBY CERTIFY that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgements, James L. Simpson, known by me to be the person described in or identified by Florida Drivers License Number 45512-452-39-7440 and who subscribed the foregoing Articles of Organization of a Limited Liability Company, and he acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS MY HAND and official seal this 11 Day of May, 2009, in the County of Leon and the State of Florida.



*Paula W. Boone*  
My commission expires: