

Division of Corporations

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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : HENDERSON, FRANKLIN, STARNES & HOLT, P.A.  
Account Number : 075410002172  
Phone : (239) 344-1100  
Fax Number : (239) 344-1200

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**WILROCK SARASOTA, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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MAY 28 2009

**EXAMINER**

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**ARTICLES OF ORGANIZATION  
OF  
WILROCK SARASOTA, LLC**

**ARTICLE I  
NAME**

The name of the limited liability company shall be Wilrock Sarasota, LLC (the "Company").

**ARTICLE II  
MAILING ADDRESS AND STREET ADDRESS**

The mailing and street address of the principal office of the Company is:

Mailing Address: P. O. Box 61566  
Fort Myers, FL 33906

Street Address: 6360 Corporate Park Circle, Suite 4  
Fort Myers, Florida 33966

**ARTICLE III  
INITIAL REGISTERED AGENT AND OFFICE**

The name and street address of the initial registered agent of the Company is:

Scott D. Willis  
6360 Corporate Park Circle, Suite 4  
Fort Myers, Florida 33966

**ARTICLE IV  
PURPOSE**

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the state of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

**ARTICLE V  
DURATION**

The Company shall exist from the date of filing these Articles of Organization with the Department of State and shall be dissolved upon the occurrence of any event of dissolution as described in the Operating Agreement of the Company.

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TALLAHASSEE, FLORIDA

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**ARTICLE VI  
MANAGEMENT OF THE COMPANY**

The Company shall be managed by not less than one (1) manager (the "Manager") and is, therefore, a manager-managed company.

**ARTICLE VII  
OPERATING AGREEMENT**

The Members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

IN WITNESS WHEREOF, the undersigned, being an Authorized Representative of the Company, has executed these Articles of Organization, this 20 day of May, 2009.

  
Scott D. Willis, Authorized Representative

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is Wilrock Sarasota, LLC.
2. The name and address of the registered agent and office are:

Scott D. Willis  
6360 Corporate Park Circle, Suite 4  
Fort Myers, Florida 33966

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 am familiar with and accept the obligations of my position as registered agent.

  
\_\_\_\_\_  
Scott D. Willis, Registered Agent

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