(Re	equestor's Name)	1
(111	oquestor s riame,	•
(<u>\</u>	ddress)	
(~	101633)	
(1)	idress)	
(AC	iuress)	
/C:	tulCtotol7in/Dhan	- 1 0
(CI	ty/State/Zip/Phor	e #)
PICK-UP	MAIT WAIT	MAIL
	<u> </u>	
(Bt	isiness Entity Na	me)
(5)		
(Document Number)		
Certified Copies	_ Certificate	s of Status

Special Instructions to Filing Officer:

L. SELLERS

JUN 11 2009

EXAMINER

Office Use Only



100156744261

06/10/09--01026--003 **125.00

COVER LETTER

CUDIECT.	JECT: Wesburry Holdings LLC.	
SUBJECT:		ed Liability Company
The enclosed Article	es of Organization and fee(s) are	submitted for filing.
Please return all core	respondence concerning this mat	ter to the following:
		Adrien Burrell Name of Person
		Name of Person
		Firm/Company
	963	3 SW 84th Strret
		Address
 		esville, FL 32608 y/State and Zip Code
	ade	eburrell@cox.net for future annual report notification)
For further informat	ion concerning this matter, pleas	•
	ussell Wesley une of Person	at (352) 672-0772 Area Code & Daytime Telephone Number
Enclosed is a chec	k for the following amount:	•
∑ \$125.00 Filing Fe	Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) S160.00 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 Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Wesburry Holdings LLC. (Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")				
Principal Office Address:	Mailing Address:			
9638 SW 84th Street Gainesville, FL 32608	9638 SW 84th Street Gainesville, FL 32608			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another			
The name and the Florida street address of the re-	egistered agent are:			
Ronald A. C	arpenter			
Name				
5608 NW 43				
Florida street address (P.O.	Box NOT acceptable)			
Gainesville City, State, ar	FL 32653			
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	cept service of process for the above stated limited his certificate, I hereby accept the appointment as v. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S			
(CONTINI	UED)			

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:

<u>Title:</u>	Name and Address:			
"MGR" = Manager "MGRM" = Managing Member				
MGR	Adrien Burrell			
	9638 SW 84th Street			
	Gainesville, FL 32608			
MGR	Russell Wesley			
	9260 SW 31st Place			
	Gainesville, FL 32608			
				
				
(Use attachment if necessary)	· 			
ADTICLE V. Effective data if other than the	data of films.			
	e date of filing: (OPTIONAL) se specific and cannot be more than five business days prior			
to or 90 days after the date of filing.)				
REQUIRED SIGNATURE:	~ MM			
Signature of a member or an authorized representative of a member.				
	ction 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury rein are true.)			
	Adrien Burrell			
	ped or printed name of signee			
Filing Fees:	•			
\$175 00 Ciling Eas for Antigles of Ongo	inization and Decignation			

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

O9 JUN 10 PH 4: 53