

Division of Corporations

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Florida Department of State
Division of Corporations
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

W A Ward LLC

Certificate of Status	1
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TALLAHASSEE, FLORIDA

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EXAMINER

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name

The name of the Limited Liability Company is: **W A Ward 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:

5317 Jacaranda Avenue

5317 Jacaranda Avenue

Middleburg, FL 32068

Middleburg, FL 32068

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

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

Woodrow Ward

Name

5317 Jacaranda Avenue

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Middleburg, FL 32068

(City / State / Zip)

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 - Woodrow Ward

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ARTICLE IV - Manager(s) or Managing Member(s):

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The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

Jane Tomasik - 5317 Jacaranda Avenue, Middleburg, FL 32068

(Use attachment if necessary)

REQUIRED SIGNATURE:

Jane Tomasik

Signature of a member or 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.)

Jane Tomasik

Typed or printed name of signee

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