(Requestor's Name) (Address)		
(Address)	900158337279	
(City/State/Zip/Phone #)		
(Business Entity Name)	08/12/0901010018 **130.00	
(Document Number) Certified Copies Certificates of Status	FIL 2009 AUG 1 SECRETA TALLAHAS	
Special Instructions to Filing Officer:	FILED 2009 AUG 12 PH 12: 11 SECRETARY OF STATE A TALLAHASSEE, FLORIDA	

Office Use Only

M. THOMAS EXAMINER

Monday, August 10, 2009

Philip G. Lippard 2402 Palm Ridge Road Unit 2 PMB 207 Sanibel, Florida 33957

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

RE: Wayfarer Holdings LLC Filing

FILED PHIZ: 11
2009 AUG 12 PHIZ: 11
SECRETARY OF STATE A
SECRETARY OF STATE A

Dear Sir:

Enclosed is filing paperwork and filing fee for registering 'Wayfarer Holdings LLC" as a limited liability company. Should you have any questions please contact me in Sanibel at 239-470-4020 or at the Email address listed below.

Sincerely,

Phillip G. Lippard

plippard@shipmyluggage.net

COVER LETTER

	of Corporations		
SUBJECT:	Wayfarer Holdings LLC		
	Name of Limited	l Liability Company	
The enclosed Arti	cles of Organization and fee(s) are su	bmitted for filing.	
Please return all c	orrespondence concerning this matter	to the following:	
		ip G. Lippard	
	N	Name of Person	
		er Holdings LLC	
	1	Firm/Company	
	2402 Palm Ridg	je Road, Unit 2 PMB 183	720
-		Address	9 AU
	Sani	ibel FL 33957	2009 AUG 12 P
	City/	State and Zip Code	EEE O
	plippard@	Shipmyluggage.net r future annual report notification)	PH 12: 1
For further inform	nation concerning this matter, please of		ATE ARIOA
F	Philip G. Lippard	at (239) 470-40	20
	Name of Person	Area Code & Daytime Telephone N	umber
Enclosed is a ch	eck for the following amount:		
\$125.00 Filing	Fee \$\sums\$\ \$130.00 \text{ Filing Fee & [} \text{Certificate of Status}	Certified Copy Certi (additional copy is enclosed) Certi	00 Filing Fee, ficate of Status & fied 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 Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
Wayfarer Holdings LLC				
(Must end with the words "Limited Lis	ability 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:			
Duinsing I Office Address.	Mailing Address			
Principal Office Address:	Mailing Address:			
2402 Palm Ridge Road	2402 Palm Ridge Road			
Unit 2 Suite 183	Unit 2 PMB 183			
Sanibel FL 33957	Sanibel FL 33957			
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rejbusiness entity with an active Florida registration.) The name and the Florida street address of the	2402 Palm Ridge Road Unit 2 PMB 183 Sanibel FL 33957 red Office, & Registered Agent's Signature: registered Agent. You must designate an individual or another the registered agent are: S. Lippard T. S. Lippard			
	SAR NO			
Philip G. Lippard				
Nan	me FLU			
446 Surfs	sound Court			
Florida street address (P.O. Box NOT acceptable)				
Sanibel 33957	FL			
City, State	e, and Zip			
9 9	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as			

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)

(CONTINUED)

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> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Philip G. Lippard 2402 Palm Ridge Road, Unit 2 PMB 207 Sanibel FL, 33957	
MGR	Gene Routh 2402 Palm Ridge Road, Suite 2 Sanibel FL 33957	
	TA SEC	
(Use attachment if necessary)	TETARY OF P	
ARTICLE V: Effective date, if other than the date of filing: (@PTIOTAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prioto or 90 days after the date of filing.)		
REQUIRED SIGNATURE:	or an authorized representative of a member.	
(In accordance with sect	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury	
Filing Fees:	ped or printed name of signee	

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)