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SECRETARY OF STATE
FALL AHASSEF, FLORIDA

D. BRUCE

DEC 2 1 2009

EXAMINER

COVER LETTER

TO: Registration of	on Section Corporations		
SUBJECT:	E. JON WEIF	FENBACH, ESQ., LLC	
· -		Liability Company	
The enclosed Article	s of Organization and fee(s) are sub	mitted for filing.	
Please return all corr	espondence concerning this matter t	to the following:	
		I W. KAKLIS	
	Na	me of Person	
	WEIFFEN	BACH & KAKLIS	
	Fi	m/Company	
	538 12T	H STREET W.	
		Address	
	BRADENTO	N, FLORIDA 34205	₹
		ate and Zip Code	09 J
	JWKAKLI	S@YAHOO.COM	AHA DEC
	E-mail address; (to be used for f	ature annual report notification)	18 SS:
For further information	on concerning this matter, please cal	ıl:	F. P.
	N W. KAKLIS at	(941) 747-761 Area Code & Daytime Telephone Nur	ARY OF STATE ASSEE, FLORIDA
Enclosed is a check	for the following amount:		A
_		Certified Copy Certific (additional copy is enclosed) Certific	0 Filing Fee, cate of Status & ed Copy nal 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 - Nan The name of the Li	ne: mited Liability Company i	s:
(Mu	E. JON WEIFFENB	ACH, ESQ., LLC bility Company," "L.L.C.," or "LLC.")
ARTICLE II - Ad The mailing addres		principal office of the Limited Liability Company is:
Principal Office A	ddress:	Mailing Address:
538 12TH STREE BRADENTON, FI		538 12TH STREET W. BRADENTON, ELORIDA 34205
(The Limited Liability Cobusiness entity with an a	egistered Agent, Registerompany cannot serve as its own Registration.) Florida street address of the	ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
The name and the t		Ēķ 🥺
	Nam	KAKLIS APP
	538 12TH \$	STREET W.
	Florida street address (P.	O. Box NOT acceptable)
	BRADENTON FL 3420	05 FL 55 PS
	City, State,	, and Zip
liability compai registered agent ai statutes relating i	ny at the place designated in nd agree to act in this capac to the proper and complete p	o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S

(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:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	E. JON WEIFFENBACH 538 12TH STREET W. BRADENTON, FLORIDA 34205
(Use attachment if necessary)	
TICLE V: Effective date, if other than the effective date is listed, the date must be	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
CICLE V: Effective date, if other than the effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than five business days prior
FICLE V: Effective date, if other than the n effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a memb (In accordance with see of this document constitution that the facts stated here.)	per or an authorized representative of a member.
FICLE V: Effective date, if other than the n effective date is listed, the date must be 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a memb (In accordance with see of this document constitution that the facts stated here.)	be specific and cannot be more than five business days prior per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)