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•
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special Instructions to Filing Officer:
A. LUNT
JAN 12 2010
EXAMINER

Office Use Only



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08/28/09--01029--018 ++155.00





Division of Corporations

August 31, 2009

TINA BOYCE 1500 AVENUE F SUITE 3 ELY, NV 89301

SUBJECT: WESTWOOD HOLDINGS, LLC

Ref. Number: W09000039187

We have received your document for WESTWOOD HOLDINGS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 509A00029153

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

Westwood Holdings, LLC

Enclosed is an original and one copy of the Articles with a check in the amount of \$155.00 for the Secretary of State which represents the filing fee for a Limited Liability Company.

Please return the enclosed additional copies to me with the filing date stamped on it.

FROM: Strategic Corporate Services Plus, Inc

1500 Avenue F Suite 3

Ely, Nevada 89301

866-310-7269

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:	West	wood	Holdi	ngs, LLC	,	
	Name of Limi				SECRETA	
The enclosed Articles of	of Organization and fee(s) are	submitt	ed for fil	ing.	CAHA	
Please return all corresp	pondence concerning this mat	ter to th	e followi	ing:	SSEE OF	
		Tina	Boyce		70	
		Name of Person				
	Strategic Cor	porate	e Servi	ces Plus, l	nc.	
		Firm/C	Company			
	1500	Aveni	ue F Si	uite 3		
		Ad	dress			
			/. 8930			
	Ci	ty/State	and Zip Co	ode		
	tboy	ce@s	fstaxes	s.com		
	E-mail address: (to be used	tor lutur	e annual r	eport notificati	on)	
For further information	concerning this matter, pleas	e call:				
Tin	na Boyce	at (866		310-7269	
Name	of Person		Area Co	ode & Daytime	Telephone Number	
Enclosed is a check for	or the following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Ce	rtified C	ling Fee & Copy opy is enclosed	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	
	Mailing Address Registration Section		Registr	Courier Add		
	Division of Corporations P.O. Box 6327			on of Corpora Building	itions	
•	Tallahassee, FL 32314	•		Executive Cen	iter Circle	

Tallahassee, FL 32301

FILED

			TALL SEC
ARTICLES OF ORGANIZ	ATION FOR FI	ORIDA LIMITED LIABILITY CO	MPANY
ARTICLE I - Name: The name of the Limited Liab		ASSEE. FL	
٧	Vestwood Hori	zon. LLC	
(Must end with th	words "Limited Liabil	ity Company," "L.L.C.," or "L.L.C.")	P
ARTICLE II - Address: The mailing address and stree	t address of the pr	incipal office of the Limited Liability C	ompany is:
Principal Office Address:		Mailing Address:	
7650 Westwood Drive, Apt 508 Tamarac, FL, 33321		7650 Westwood Drive, Apt 508 Tamarac, FL 33321	
	t serve as its own Regist registration.)	Office, & Registered Agent's Signatured Agent. You must designate an individual or another distorted agent are:	
The name and the Florida site			
	Rasheed Mo	nammed	
Florid	650 Westwood I	Box NOT acceptable) FL. 33321	

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		Name and Address:	170.
	"MGRM" = Managi	ng Member		TLA SCS
	MGRM		Rasheed Mohammed 7650 Westwood Drive. Apt 508 Tamarac, Fl. 33321	JAW 11 111 1 JAHASSEE, FLO
			:	ATE DRIDA
				
	(Use attachment if no	ecessary)		
(If an	CLE V: Effective date effective date of date of days after the date of	the date must be sp	e of filing: (OPT pecific and cannot be more than five busine	TONAL) ss days prior
	REQUIRED SIGNA	Joshed	I Mohammed	
	Sig	nature of a member or	an authorized representative of a member.	
	of	accordance with section this document constitute at the facts stated herein	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury are true.)	·
		Ras	sheed Mohammed	
	Filing Fees:	Typed	or printed name of signec	
	6176 AA VIII V F	4-4i-lan af O-aa-i	si d Designation	

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

5 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)