

L10000046414

To: Page 1 of 4

2010-04-28 17:52:48 PDT

1323880658 From: Sheila Dang

Division of Corporations

Page 1 of 1

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((F100000910073)))



F100000910073ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 617-6383

From:
Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
Phone : (323) 962-8600
Fax Number : (323) 962-3889

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 APR 29 AM 10:04

FILED

RECEIVED

10 APR 29 AM 10:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.

Wareagleraidr llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

A. LUNT

APR 30 2010

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

To: Page 2 of 4

2010-04-28 17:52:48 PDT

15233890658 From: Sheila Dang

H10000091007 3

COVER LETTER**TO: Registration Section
Division of Corporations****SUBJECT: Wareagleraider llc**
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sheila Dang

(Name of Person)

Legalzoom.com, Inc.

(Firm/Company)

7083 Hollywood Blvd., Ste. 180

(Address)

Los Angeles, CA 90028

(City/State and Zip Code)

For further information concerning this matter, please call:

Ryan Moran

(Name of Person)

at (

823

902-8600 ext. 883

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 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
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 APR 29 AM 10:04

FILED

H10000091007 3

To: Page 3 of 4

2010-04-28 17:52:48 PDT

13233890858 From: Sheila Dang

H10000091007.3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY.**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Wareagleraider llc

(Must end with the words "Limited Liability 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:

Principal Office Address:12680 S.W. 34th Place
Davie, FL 33330**Mailing Address:**12680 S.W. 34th Place
Davie, FL 33330**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

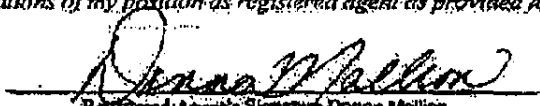
Donna Mallon

Name

12680 S.W. 34th PlaceFlorida street address (P.O. Box NOT acceptable)DavieFL 33330

City, State, and 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: Donna Mallon

(CONTINUED)

Page 1 of 2

H10000091007.3

 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

2010 APR 29 AM 10:04

FILED

To: Page 4 of 4

2010-04-28 17:52:48 PDT

1323300668 From: Sheila Dang

H10000091007 3

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Donna M. Mallion Revocable Trust
12680 S.W. 34th Place
Davie, FL 33330

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 APR 29 AM 10:04

FILED

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:
Signature of a member or an authorized representative of a member.

(In accordance with section 608.402(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Sheila Dang, Legalzoom.com, Inc.

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Page 2 of 2

H10000091007 3