L1000063203

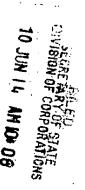
(Re	equestor's Name)			
(Address)				
(Address)				
(Ci	ty/State/Zip/Phone	. #\		
(CII	ty/State/Zip/Filone	; #)		
PICK-UP	WAIT .	MAIL		
(Bu	isiness Entity Nan	ne)		
,	•	,		
(Document Number)				
Certified Copies	_ Certificates	of Status		
-	<u> </u>			
Special Instructions to	Filing Officer:			

Office Use Only



600181850946

06/14/10--01043--018 **160.00



B. KOHR
JUN 1 5 2010

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Co	orporations				
SUBJECT: Ricky V	Vatters Licensing LLC				
		ted Liability Cor	npany		
The enclosed Articles of	of Organization and fee(s) are	submitted for fi	ling.		4
Please return all corresp	pondence concerning this mat	ter to the follow	ing:	4 2 2 3 3 3 3 3 3 3 3 3 3	•
Catherina Watters					rie.
		Name of Person		Co	
Catherina Ch	ang Watters, Esq.			3	44 O
Firm/Company					19.1 22.57. 23.57.
8815 Conroy-	-Windermere Rd. Suite 3	32		Ö.	îñ
		Address			
Orlando, FL 3	22835				
Oriando, i E c		ty/State and Zip C	ode		
catherinawatt	ers@yahoo.com			•	
	E-mail address: (to be used	for future annual r	eport notification)	
For further information	concerning this matter, please	e call:			
Catherina Watters		at (321	₁ 278-723	7	
Name	of Person		/	elephone Number	
Enclosed is a check for	or the following amount:			,	
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fi Certified (additional c		\$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	Regist Divisi Cliftor 2661 I	Courier Address ration Section on of Corporation Building Executive Center assee, FL 3230	ons er Circle	

ARTICLES OF ORGANIZATION FO	OR FLORIDA LIMITED LIABILITY COMPANY		
ARTICLE I - Name: The name of the Limited Liability Compa	ny is:		
Ricky Watters Licensing 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:	Mailing Address:		
6263 Cypress Chase Drive	8815 Conroy-Windermere Rd.		
Windermere FL 34786	Suite 332		
	Orlando FL 32835		
(The Limited Liability Company cannot serve as its owr business entity with an active Florida registration.) The name and the Florida street address of			
Cathorina Chana Ma	Horo Eog		

Catherina Chang Watters, Esq. Name

8815 Conroy-Windermere Rd. Suite 332

Florida street address (P.O. Box NOT acceptable)

FL 32835 City, State, and Zip Orlando

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 Men	Name and Address:
MGRM	Catherina Chang Watters
	8815 Conroy-Windermere Rd. Suite 332
	Orlando FL 32835
MGRM	Richard James Watters
	8815 Conroy-Windermere Rd. Suite 332
	Orlando FL 32835
	
(Use attachment if necessary	y)
CLE V: Effective date, if othe effective date is listed, the date of filing	er than the date of filing: (OPTIONAL) te must be specific and cannot be more than five business days prior (.)
REQUIRED SIGNATURE	€:
	Carewatter
Signature o	of a member or an authorized representative of a member.
(In accordan	nce with section 608 408(3). Florida Statutes, the execution

Catherina Chang Watters

that the facts stated herein are true.)

Typed or printed name of signee

of this document constitutes an affirmation under the penalties of perjury

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)