# L10000103542

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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10 OCT -1 PM 4: 10

SECRETARY OF STATE

D. BRUCE.

OCT 4 2010

EXAMINER



## FLORIDA DEPARTMENT OF STATE Division of Corporations

September 24, 2010

THOMAS E. WEBER 18725 S. O'BRIEN RD. GROVELAND, FL 34736

SUBJECT: WORLD ENTERTAINMENT SERVICES, LLC

Ref. Number: W10000044756

FILED

10 OCT -1 PM 4: 10
SECRETARY OF STATE ALLAHASSEE, FLORIDA

We have received your document for WORLD ENTERTAINMENT SERVICES, LLC and your check(s) totaling \$130.00. 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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 610A00022765

# **COVER LETTER**

51.15

TO: Registration S Division of Co						
SUBJECT: Lakesho	ore Solutions					
	Name of Limite	d Liability Com	npany		•	
	f Organization and fee(s) are s					
Please return all corresp	ondence concerning this matt	er to the followi	ng:			
Thomas E. W	/eber					
		Name of Person				
Lakeshore Sc	olutions .					
		Firm/Company				
18725 S. O'B	rien Rd.					
<del></del>		Address			15	
Groveland, Fl				<u></u>	ECHE LLA	10 OCT
		y/State and Zip Co	ode		TAI	<del>-</del>
t.weberpalms	@gmail.com E-mail address: (to be used f	or future annual r	eport notification)		<u>~~</u>	- r
For further information	concerning this matter, please		opore nouncemon,		OF S	
1 of the mor anotheron	voiceining and maner, promo-	, oug.			OR!	·
Tom Weber		at ( 352	<u>227-0575</u>		DA DA	<b>&gt;</b>
Name	of Person	Area Co	ode & Daytime Te	lephone Number		
Enclosed is a check for	or the following amount:					
□\$125.00 Filing Fee	△\$130.00 Filing Fee & Certificate of Status	Q\$155.00 Fit Certified (additional of		■ \$160.00 Filin Certificate of Certified Cop (additional copy	Status &	

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:	-
World Entertainment Services, IdeC.	Lake shore Solutions,
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
18725 S. O'Brien Rd.	18725 S. O'Brien Rd.
Groveland, FL 34736	Groveland, FL 34736
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	Office, & Registered Agent's Signature: ered Agent. You must designate an individual or another
The name and the Florida street address of the r	egistered agent are:
Terry Dorner	五 五 五 五 一
Name	SSE
7119 Lake Dr.	
Florida street add	ress (P.O. Box NOT accentable)

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.

City, State, and Zip

FL 32809

Registered Agent's Signature (REQUIRED)

Orlando

(CONTINUED)
Page 1 of 2

Seri . .

# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

# # # # D #	Name and Address:
"MGR" = Manager	
"MGRM" = Mana	ging Member
MGR	Tom Weber
	18725 S. O'Brien Rd
	Groveland, FL 34736
<u> </u>	
<del></del>	
	**************************************
(Has attachment if	(magazanu)
(Use attachment if ICLE V: Effective date is liste	ate, if other than the date of filing: (OPTIONAL)
ICLE V: Effective da	ate, if other than the date of filing: (OPTIONAL) ad, the date must be specific and cannot be more than five business days prior
ICLE V: Effective da	ate, if other than the date of filing: (OPTIONAL) ad, the date must be specific and cannot be more than five business days prior a of filing.)
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ICLE V: Effective date is listense of the date of the	nte, if other than the date of filing:

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)