Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Lumber

: (850)617-6383

From:

Account Name : WNF LAW, P.L.
Account Number : I20090000040
Phote : (305)760-8500
Fax Number : (305)760-8510

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

Email Address:

JPQWNFLOW, Com

ONOV 12 PH 4: 33
SECRETARY OF STATE

FLORIDA LIMITED LIABILITY CO. WASS 28 FLAGLER, LLC

Certificate of Status	1
Certified Copy	0
Page frount	03
Estimated Charge	\$130.00

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SECRETARY OF STATE
SECRETARY OF STATE

Electronic Filing Menu

Corporate Filing Menu

Held. BRYAN

NOV 15 2010

EXAMINER

NOV. 12. 2010 4:01PM WNF	LAW, P. L. ((HIVOUU246734 3)))
•	COVER LETTER
TO: Registration Section Division of Corporation	
SUBJECT: WASS 28	
	Name of Limited Liability Company
The enclosed Articles of Organiza	and fee(s) are submitted for filing.
Please return all correspondence co	terning this matter to the following:
<u>JP@WNFLA</u>	W.COM
WNF LAW, F	THE
VVIVI LAVV, I	Firm/Company
201 South Bis	ayne Blvd., 34TH FLOOR MIAMI CENTER Address City/State and Zip Code
	Address Fig. 3
<u>Miami, Florida</u>	3131 City/State and Zip Code
JP@WNFLAW.	OM dress: (to be used for future annual report notification)
For further information concerning	
JACQUELINE POR	AL at 305 760-8507
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the foll	ving amount:
\$125.00 Filing Fee \$130.00 Certif	Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, ate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Divisig	Address Street/Courier Address ton Section Registration Section of Corporations Division of Corporations see, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301
	(((H10000246754 3)))

ARTICLES OF ORGA	ZATION FOR FLORIDA LIMITED	•
ARTICLE I - Name: The name of the Limited I	ability Company is:	TALCAS SEE OF
WASS 28 FLA		2555 P. 12
(Must ond wi	the words "Limited Liability Company, "L.L.C.," br "	rrc.,
ARTICLE II - Address: The mailing address and s	eet address of the principal office of the I	Limited Liability Company is:
Principal Office Address	Mailing Address:	
201 South Biscayne Blvd., 34TH FLO Miami, Florida 33131	R MIAMI CENTER 201 South Biscayne Blvd. Wiami, Florida 3	34TH FLOOR MIAMI CENTER 3131
ARTICLE III - Registers (The Limited Liability Company consumers entity with an active Flat	I Agent, Registered Office, & Registere onot serve as its own Registered Agent. You must design the registration.)	ed Agent's Signature: mate an individual or another
The name and the Florida	treet address of the registered agent are:	, .
WN	CORPORATE SERVICES, LL	<u>.C</u>
	Name	
201 Sd	h Biscayne Bivd., 34TH FLOOR MIAM! CENTS	ER
	Florida street address (P.O. Box NOT acco	eptable)
Miar	, Florida 33131 _{FL}	
	City, State, and Zip	
liability company at the	sistered agent and to accept service of proce place designated in this certificate, I hereb	y accept the appointment as
registered agent and agree	to act in this capacity. I further agree to comply with the provisions of all	
accept the obligation	oper and complete performance of my duties, and I am familiar with and of my position as registered agent as provided for in Chapter 608, F.S	
	Mary's Signature (REQUIRED)	

Page 1 of 2

(CONTINUED)

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A	RTICLE IV- Manag	er(s) or Managing Member(s):
Υ	he name and address o	ach Manager or Managing Member is as follows:
	<u>ltle:</u> MGR" = Managor	Name and Address:
	MGRM" ≈ Managing I	wember 140 6 mm
		PEC 10
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		<u></u>
		
J)	Jse attachment if neces	ary)
. ********		(0.000)
AKIICL If an effe	E V: Effective date, if	ther than the date of filing: (OPTIONAL) that must be specific and cannot be more than five business days prior
	ays after the date of fi	
ď	EQUIRED SIGNAT	
77	EVOLUED SIGNAT	
	Simat	re of Knember or an authorized representative of a member,
	!	1
	(In accordance) constitutes an a	ith section 608.408(3), Florida Statutes, the execution of this document firmation under the penalties of perjury that the facts stated herein are true.
	I am aware that constitutes a thi	firmation under the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the facts stated herein are true. In the penalties of State If degree folony as provided for in s.817.155, F.S.)
	l.	eve L. Waserstein Eso.
		Typed or printed name of signed
	Filing Fees:	
	\$125.00 Filing Fee for	ticles of Organization and Designation gent
	\$ 30.00 Certified Copy	Optional)
	\$ 5.00 Certificate of	atus (Optional)
		Page 2 of 2 ((H100002467543)))