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(Requestor's Name)	
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(Address)	
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(City/State/Zip/Phone #)	
(Sity/State/Zip/ Hone #/	
PICK-UP WAIT	/AIL
(Business Entity Name)	
(Document Number)	
(Boodment Hamber)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



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SECRETARY OF STATE ORING

J. SAULSBERRY EXAMINER

FEB 0 4 2011

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: WAMR, L.L.C.				
(Name o	of Resulting Florida Limited Company)			
	Articles of Organization, and fees are submitt Limited Liability Company" in accordance wi			
Please return all correspondence concern	ning this matter to:			
WILLIAM RHODES (Contact Person)				
(Contact Person)				
(Firm/Company)		۳í.	~>	
626 BIRD BAY DRIVE SOUTH, UNI	T 205	ALL SEC	2011 FEB	
(Address)		AHA	8	
VENICE, FL 34285		SSE	မီ	-
(City, State and Zip Cod	e)	E P	=	[1]
billrhodes11@comcast.net E-mail address: (to be used for future annual rep	ort notifications)	FLORID	AM 10: 35	
For further information concerning this i		DIT	တိ	
WILLIAM RHODES	at (941) 545-2176			
(Name of Contact Person)	(Area Code and Daytime Telephone Numb	er)		
Enclosed is a check for the following am	nount:			
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization) \$\$155.00 Filing Fees and Certificate of Status	\$180.00 Filing Fees and Certified Copy Certificate of Status			
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314			

Certificate of Conversion

For

"Other Business Entity"

Into

Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this Cert Conversion is:	ificate	of	
WAMR, L.L.C.			
(Enter Name of Other Business Entity)	ŢAŢ.	201	
2. The "Other Business Entity" is a LIMITED LIABILITY COMPANY	LAA.	2011 FEB -3	नि
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)	TARÝ C ASSEE		
first organized, formed or incorporated under the laws of <u>ARIZONA</u> (Enter state, or if a non-U.S. entity, the name of the country)	F STATE	AM 10: 35	C
on April 13, 2001	Di	35	
(Enter date "Other Business Entity" was first organized, formed or incor	porate	d)	
 3. If the jurisdiction of the "Other Business Entity" was changed, the state or country u which it is now organized, formed or incorporated: 4. The name of the Florida Limited Liability Company as set forth in the attached Art Organization: 	_•		of
WAMR, L.L.C.			
(Enter Name of Florida Limited Liability Company)	- *		
5. If not effective on the date of filing, enter the effective date: (The effective date: 1) cannot be prior to nor more than 90 days after the date this filed by the Florida Department of State; AND 2) must be the same as the effective attached Articles of Organization, if an effective date is listed therein.)			
6. The conversion is permitted by the applicable law(s) governing the other business enconversion complies with such law(s) and the requirements of s.608.439, F.S., in effecti			rsion.

7. The "Other Business Entity" currently exists on the official records of the jurisdiction under which it is

currently organized, formed or incorporated.

Signed this 14TH day of JANUARY	 20 <u>11</u>		
Signature of Member or Authorized Rep Individual signing affirms that the facts sta constitutes a third degree felony as provide	ited in this document are true. Any false in		,
Signature of Member or Authorized Representation Name: WILLIAM RHODES	entative: Null Aboda Title: MANAGING MEMBER	<u></u>	
Signature(s) on behalf of Other Business E this document are true. Any false informat s.817.155, F.S. [See below for required sign	ion constitutes a third degree felony as pro	the facts sta ovided for	ated in in
Bulk 11			
Signature: All Signature: Printed Name: WILLIAM RHODES	Title: MANAGING MEMBER		
Signature:			
Signature: Printed Name:	Title:		
Signature:Printed Name:	Title		
Printed Name:	Titte.		
Signature:		<u> </u>	ı
Signature:Printed Name:	Title:		
		2011 FEB SECRETA TALLIAHA	46
Signature:Printed Name:	Trial	-3 -3 -3	
Printed Name:	i ttle:		
Signature:		AM 10: 35	
Signature:Printed Name:	Title:		, L
		₽ ₩ 33	†)
If Florida Corporation:	0.00	-	
Signature of Chairman, Vice Chairman, Direct If Directors or Officers have not been selected			
If Directors or Officers have not been selected	i, an incorporator musi sign.		
If Florida General Partnership or Limited Signature of one General Partner.	Liability Partnership:		
If Florida Limited Partnership or Limited Signatures of ALL General Partners.	Liability Limited Partnership:		
All others: Signature of an authorized person.			
Fees:			
Certificate of Conversion:	\$25.00		
Fees for Florida Articles of Organization:	\$125.00		
Certified Copy:	\$30.00 (Optional)		
Certificate of Status:	\$5.00 (Optional)		
	Page 2 of 2		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

(Must end with the words "Lim	ited Liability Company,	the abbreviation "L.L.C.," or the designation "LLC.	")
ARTICLE II - Addres The mailing address and		the principal office of the Limited Liab	ility Company is:
Principal Office Addre		Mailing Address:	inty company is.
626 BIRD BAY DRIVE SOLVENICE, FL 34285	UTH, UNIT 205	626 BIRD BAY DRIVE SOUT	H, UNIT 205
(The Limited Liability Company business entity with an active I	y cannot serve as its own Florida registration.)	stered Office, & Registered Agent's S n Registered Agent. You must designate an individual	al or another
(The Limited Liability Compan- business entity with an active I	y cannot serve as its own Florida registration.)	n Registered Agent. You must designate an individual	al or another
(The Limited Liability Company business entity with an active I	y cannot serve as its owr Florida registration.) da street address of	n Registered Agent. You must designate an individual	al or another
(The Limited Liability Company business entity with an active I	y cannot serve as its own Florida registration.) da street address of WILLIAM RHO	n Registered Agent. You must designate an individual fithe registered agent are:	al or another
(The Limited Liability Compan- business entity with an active I	y cannot serve as its own Florida registration.) da street address of WILLIAM RHO 626 BIRD BAY	n Registered Agent. You must designate an individual factor the registered agent are: DES Name	al or another
(The Limited Liability Company business entity with an active has a company the name and the Florical Company to the name and the nam	y cannot serve as its own Florida registration.) da street address of WILLIAM RHO 626 BIRD BAY	n Registered Agent. You must designate an individual of the registered agent are: DES Name / DRIVE SOUTH, UNIT 205	2011 FEB

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Me	Name and Address: ember		
MGRM	WILLIAM RHODES 626 BIRD BAY DRIVE SOUTH, UNIT 205 VENICE, FL 34285		
	SECRETA AAS	2011 FEB -	ন্দ্ৰ ল
	RY OF STATE SEE. FLORIDA	-3 AM 10: 35	
(Use attachment if necessa	ary)		
•			
CLE V: Effective date, if effective date: 1) cannot be lorida Department of State	other than the date of filing (OPTIONAL) oe prior to nor more than 90 days after the date this documente; AND 2) must be the same as the effective date listed in effective date listed therein.)		
CLE V: Effective date, if effective date: 1) cannot be lorida Department of Statisticate of Conversion, if an UIRED SIGNATURE:	(OPTIONAL) be prior to nor more than 90 days after the date this documente; <u>AND</u> 2) must be the same as the effective date listed in effective date listed therein.)		
CLE V: Effective date, if effective date: 1) cannot be dorida Department of Statisticate of Conversion, if an UIRED SIGNATURE:	(OPTIONAL) be prior to nor more than 90 days after the date this docume te; <u>AND</u> 2) must be the same as the effective date listed in		
CLE V: Effective date, if effective date: 1) cannot be orida Department of Staticate of Conversion, if an JIRED SIGNATURE: Signature of a memilin accordance with section 608 the penalties of perjury that the	(OPTIONAL) the prior to nor more than 90 days after the date this documente; AND 2) must be the same as the effective date listed in effective date listed therein.)	the at	tached