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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

D. BRUCE

FEB 15 2011

EXAMINER

COVER LETTER

TO: Registration Division of C	Section Corporations		.4	
SUBJECT:	Williar	n R. Wise LLC		
	Name of Lin	nited Liability Company		•
The enclosed Articles	of Amendment and fee(s) are su	abmitted for filing.		
Please return all corre	spondence concerning this matte	er to the following:		
		David N. Williams		-
	•	Name of Person		
	Age	nts and Corporations,	Inc.	
		Firm/Company		_
	300 FIFTH	300 FIFTH AVENUE SOUTH Suite 101-330		
,	***************************************	Address		·
		NAPLES FL 34102 US	3	_
		City/State and Zip Code		_
	F-mail address:	jwise05@gmail.com (to be used for future annual rep	ort notification)	Es -
For further informatio	n concerning this matter, please	•	on managem,	1 FEB
V	Villiam R. Wise	at (941)	879-1385	EB 14 PM (ETARY OF CHASSEE, F
Nam	ne of Person	Area Code &	Daytime Telephone Numb	
Enclosed is a check for	or the following amount:			A A
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	nclosed) Certifie	iling Fee, eate of Status & ed Copy onal copy is enclosed)
MA	ILING ADDRESS:	STREET/0	COURIER ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

<u>FIRST</u>	The name of the limited liability company is: William R. Wise L.L.C.			
<u>SECO</u>	ND: The articles of organization or the application to transact business			
<u>(CH</u>	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE ST	<u> FATEM</u>	<u>ENT</u>	
√	Contains an incorrect statement. The incorrect statement, the reason the statement, and the corrected statement are as follows: Need to add: William R. Wise MGR	itement	is	-
	Address: 2843 Nassau Street			-
	City,State,Zip: Sarasota, Florida 34231	Ā _{c?}		-
		CAH	FEB	****
	<u>OR</u>	ARY (4	F
	Was defectively signed. The manner in which the document was defectively the appropriate correction are as follows:	OF STATE	op Gand Gand	
				•
Dated:	February 11 2011			
	Signature of a member or authorized representative of a member			
	William R. Wise	,		
	Typed or printed name of signee			
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)			

Electronic Articles of Organization For Florida Limited Liability Company

L11000017313 FILED 8:00 AM February 09, 2011 Sec. Of State gmcleod

Article I

The name of the Limited Liability Company is: WILLIAM R. WISE L.L.C.

Article II

The street address of the principal office of the Limited Liability Company is:

2843 NASSAU STREET SARASOTA, FL. US 34231

The mailing address of the Limited Liability Company is:

2843 NASSAU STREET SARASOTA, FL. US 34231

Article III

The purpose for which this Limited Liability Company is organized is: HOME IMPROVEMENT

Article IV

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

AGENTS AND CORPORATIONS, INC. 300 FIFTH AVENUE SOUTH SUITE 101-330 NAPLES, FL. 34102

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.

Registered Agent Signature: DAVID N. WILLIAMS

Article V

• • • The name and address of managing members/managers are:

Title: MGR JULIE A WISE 2843 NASSAU STREET SARASOTA, FL. 34231 US L11000017313 FILED 8:00 AM February 09, 2011 Sec. Of State gmcleod

Article VI

The effective date for this Limited Liability Company shall be: 02/09/2011

Signature of member or an authorized representative of a member

Electronic Signature: WILLIAM R. WISE L.L.C.

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.