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EFFECTIVE DATE 04-22-11

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SLUMBERS OF STATE

B. BOSTICK
MAY - 2011
EXAMINER

COVER LETTER

Division of Corporations	•		
SUBJECT: WindFall Enterprises LLC	;		
Name of Limited L			
The enclosed Articles of Organization and fee(s) are subr	nitted for filing.		
Please return all correspondence concerning this matter to	the following:		
Tanya Oosterhous			
Nar	ne of Person		
WindFall LLC			
Fin	m/Company		
3207 Horse Carriage Way #2		TALE	
	Address	AP AP	
Naples FL 34105		APR 28	
City/Sta	ate and Zip Code		
tanya@fitfeet.com			
E-mail address: (to be used for for	iture annual report notification)	2: 20 NATE ORID	
For further information concerning this matter, please cal	l:	DA O	
Tanya Oosterhous	(239 732 8589		
Name of Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:	buss on pillar par e	. F	
\$125.00 Filing Fee \$\bigs\\$130.00 Filing Fee & \bigs\\\ Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Certified Copy (additional copy is enclosed) Certified Copy (additional copy	f Status & Dy	
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

WindFall Enterprises LLC	
(Must end with the words "Limited I	Liability Company, "L.L.C.," or "LL.C.")
ARTICLE II - Address:	
	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3207 Horse Carriage Way #2	WindFall Enterprises LLC
Naples FL 34105	3207 Horse Carriage Way #2
	Naples FL 34105
	lame APR 28 Parriage Way #2
Florida stree	et address (P.O. Box NOT acceptable)
Naples	FL 34105
Cit	y, State, and Zip
liability company at the place designated registered agent and agree to act in this cap statutes relating to the proper and complet	d to accept service of process for the above stated limited d in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of all te performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

"MGRM" = Managing Member			
MGR	Tanya Oosterhous		
	3207 Horse Carriage Way #2		
	Naples FL 34105		
			
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(Use attachment if necessary)			
ICI E V. Effective data if other the	an the date of filing: April 22, 2011	TIONALL	
	sust be specific and cannot be more than five busine		rior
90 days after the date of filing.)		w enjop.	

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

Tanya Oosterhous

Typed or printed name of signee

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)