Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H110001291953)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I2000000146 Phone : (305)444-4994 Fax Number : (305)444-4977

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

Email Address:

FLORIDA LIMITED LIABILITY CO. JLW III ENTERPRISES LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu



MAY 1 2 2011



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ā	\mathbf{R}	Υ	1	CI	Л	Ŧ	<u>.</u>	N	aĭ	п	e:
42	ш		ш	u		1	-	14	41	ш	c.

The name of the Limited Liability Company is:

WIII Enterprises LLC
(Must end with the words "Limited Liebility Company, "LLC," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1828 N. University Driv Pembroke Pines FL 330

SW Tenth Avenue

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Letauric Jerome Williams

550 SW Tenth Avenue
Florida street address (P.O. Box NOT acceptable)

Hornestead Fr. 330,32
City, State, and Zip

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 Mer	Name and Address:
MGR	Letauric J. Williams
Mar	550 SW Tenth Avenue
	Homestead PL 33032
·	
	<u> </u>
	·
!	
Use attachment if necessary	<i>f</i>)
fective date is listed, the dat	r than the date of filing: (OPTIONA te must be specific and cannot be more than five business day)
days after the date of filing.	
days after the date of filing. REQUIRED SIGNATURE	Examples of a member.

Typed or printed name of signes