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(Re	equestor's Name)
(Ac	ddress)
(Ād	ddress)
(C)	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	A. LUNT
	MAY <b>19</b> 2010
	EXAMINER

Office Use Only

800207639448

05/18/11--01013--003 \*\*125.80

# **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Walters Bentley Group, LLC.			
Name of Limited Liability Company			
The enclosed Articles of Organization and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Jamison Walters			
Name of Person		<del></del>	
Firm/Company			
14512 Mirabelle Vista Circle			
Address	Egr	20	
Tampa, FL 33626		2011 HAY 18	en.
City/State and Zip Code	3.7.		-70 -701
jamisonbwalters@gmail.com	5529		
E-mail address: (to be used for future annual report notification)		PM	Ţ
For further information concerning this matter, please call:		PM 3: 34	A CONTRACTOR
Jamison Walters at (727 ) 455-7375	Dr.	34	
Name of Person Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount:			
\$125.00 Filing Fee \$130.00 Filing Fee \$ S155.00 Filing Fee \$ Certificate of Status Certified Copy (additional copy is enclosed) Certified C (additional copy is enclosed)	of Status Copy	&	
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			

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Walters Bentley Group, LLC.
(Must end with the words "Limited Liability Company, "L.L.C.," 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:
14512 Mirabelle Vista Circle	14512 Mirabelle Vista Circle
Tampa, FL 33626	Tampa, FL 33626
ARTICLE III - Registered Agent, R	legistered 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:

Clark Walters

Name

2370 Clark Cameron Dr

Florida street address (P.O. Box NOT acceptable)

Dunedin

FL 34698

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)

# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

'MGRM" = Managing Member		
Pres.	Jamison Walters	
	14512 Mirabelle Vista Circle	
	Tampa, FL 33626	
	-	<del></del>
		SECOLO MATERIAL DE LA
		- <del> </del>
		m-C
(Use attachment if necessary)		
LE V: Effective date, if other than th	e date of filing: May 15, 2011	్లే అ . (OPTIONA
Factive date is listed the date wast	be specific and cannot be more than	

# **REQUIRED SIGNATURE:**

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.)

#### Jamison Walters

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)