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# ARTICLES OF ORGANIZATION

OF

### WTP, LLC

(a Florida Limited Liability Company)

The undersigned certifies that he has associated for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges and immunities of limited liability companies for profit.

# ARTICLE I

(Name and Principal Place of Business)

The name of the limited liability company is WTP, LLC, and the mailing address and street address of its principal office is 1830 Commerce Avenue, Vero Beach, Florida 32960.

## **ARTICLE II**

(Duration and Purpose)

The limited liability company shall come into being upon the filing of the Articles of Organization with the Secretary of State, State of Florida, and shall have perpetual existence, unless earlier terminated by operation of law or as provided in these Articles or the Operating Agreement of the limited liability company. Its purpose shall be to conduct business and accomplish any and all acts permitted under the laws of the State of Florida for like companies for profit.

### **ARTICLE III**

(Initial Registered Office and Registered Agent)

The mailing address of the initial registered office, and principal place of business, of the limited liability company is 1830 Commerce Avenue, Vero Beach, Florida, 32960. The name of the company's initial registered agent at that address is Richard Schlitt.

### **ARTICLE IV**

(Membership Restrictions - Admissions)

Additional persons or entities may be admitted to the limited liability company as members upon the unanimous consent of the current members and on such terms and conditions as determined by the members and in accordance with these Articles and the Operating Agreement of the limited liability company.

# **ARTICLE V**

(Right to Continue Business)

On the death, withdrawal, resignation, expulsion, bankruptcy or dissolution of a member, or the occurrence of any other event which terminates the continued membership of a member in the limited liability company, the remaining members shall have the right to continue the business on the consent of a majority (or all) of the remaining members within ninety (90) days of the terminating or dissolving event.

### ARTICLE VI

(Management)

The limited liability company shall be managed by one manager. The name and address of

the person who shall serve until the first annual meeting of members is as follows: Richard Schlitt at 1830 Commerce Avenue, Vero Beach, Florida 32960.

IN WITNESS WHEREOF, the undersigned, being an original member of the limited liability company, certifies that this instrument constitutes the proposed Articles of Organization of WTP, LLC.

Executed by the undersigned this/5 day of June, 2011.

STATEMENT DESIGNATING REGISTERED AGENT AND OFFICE

STATE OF FLORIDA COUNTY OF INDIAN RIVER

In pursuance of Chapter 608.407(1)(d), of the Florida Limited Liability Company Act, the limited liability company identified below submits the following statement in designating its registered office and registered agent in the State of Florida:

The name of the limited liability company is WTP, LLC.

The name of the registered agent for WTP, LLC, is Richard Schlitt, and the street address of the company's principal office where the agent is located is 1830 Commerce Avenue, Vero Beach, Indian River County, Florida, 32960.

This statement is to acknowledge that, as indicated above, WTP, LLC, has appointed me, Richard Schlitt, as its Registered Agent to accept service of Process for the company at the place designated above in this certificate. I accept this 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.

Richard Schlitt

6/15/// Dated

The foregoing instrument was acknowledged before me this // day of June, 2011, by Richard Schlitt on behalf of WTP, LLC, a limited liability company. He is personally known to me or has produced his driver's license as identification.

Notary/Public State of Flørida

My Commission Expires:

