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SECRETARY OF STATE SECRET

J. BRYAN

JUL - 6 2011

EXAMINER

COVER LETTER

4

TO:	Registration Section Division of Corporations	
SUBJE	CT: Wander Beal Estate, L.L. C Name of Limited Liability Company	
The end	osed Articles of Organization and fee(s) are submitted for filing.	
Please i	eturn all correspondence concerning this matter to the following:	
-	Jennifer letrella Name of Person	
-	Mander Beal Estate L.L. C	
<i>ح</i>	3274 W Tebble Beach Ct.	
_	Lecarto FL 34461	
Le Lando FL 3 446/ City/State and Zip Code Fen OCITIOS DITTO Me X FOR Formal address: (to be used for future annual report notification)		
For furt	For further information concerning this matter, please call:	
Jer	Name of Person Name of Person Name of Person Name of Person Area Code & Daytime Telephone Number Name of Person	T
Enclose	d is a check for the following amount:	
\$125.00	Filing Fee \$\int \text{\$130.00 Filing Fee & }\text{\$155.00 Filing Fee & }\text{\$250.00 Filing Fee, }\text{\$155.00 Filing Fee & }\text{\$250.00 Filing Fee, }\	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
Wander Beal Estate L.L.C.
(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:
3274 W. Pebble Beach (3274 W. Pebble Beach (Lecanto FL 3446) Locanto FL 34461
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.) Effective Date The name and the Florida street address of the registered agent are: Name Registered Agent's Signature: Effective Date On /0/// Name Registered Agent. You must designate an individual or another business entity with an active Florida registration.) Effective Date On /0/// Perform Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
Florida street address (P.O. Box NOT acceptable) FL 34441 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 V: Effective date, if other than the date of filing: 7/1/1 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

m for tetrella

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)