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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Special Instructions to Filing Officer:

A. LUNT

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EXAMINER

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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: WhatNow, LLC		
	Name of Limited Liability Company		
The en	sclosed Articles of Organization and fee(s) are submitted for filing.		
Please	return all correspondence concerning this matter to the following:		
	Michael Vincent Rangel Name of Person		
	WhatNow, LLC		
	Firm/Company		
	495 Brickell Avenue #1702	2 2	3
	Address	<u>।</u> इ	
			-5- T
ı	Miami, FL 33131	<u> </u>	ບາ າ ສາ ["
	City/State and Zip Code		<u> </u>
	Michael.v.rangel@gmail.com E-mail address: (to be used for future annual report notification)		(함 년 (함 년
		(T)	عت
For fur	ther information concerning this matter, please call:		
Micha	ael Rangel <u>at (305</u>) 608-1005		
	Name of Person Area Code & Daytime Telephone Number		
Enclos	sed is a check for the following amount:		
\$125.00	Filing Fee \$\int_\$130.00 Filing Fee & \$\int_\$155.00 Filing Fee & \$\int_\$\$\$\$\$\$\sqrt{\$\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}	g Fee	÷,
	Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy		s &
	(additional copy		losed)
	<u>Mailing Address</u> Registration Section Street/Courier Address Registration Section		
	Division of Corporations Division of Corporations		
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle		
	Autimimoso, 1 D DD 1 1 DOOT DAOUNTO CONTOU CHOICE		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

WhatNow, LLC		
(Must end with the words "Li	mited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address	s of the principal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
195 Brickell Avenue #1702	495 Brickell Avenue #1702	2
Miami, FL 33131	Miami, FL 33131	
		
(The Limited Liability Company cannot serve as it business entity with an active Florida registration.		vidual or another
(The Limited Liability Company cannot serve as it business entity with an active Florida registration.	s own Registered Agent. You must designate an indiv ss of the registered agent are:	vidual or another SEURE D ALL:AHA
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address.	s own Registered Agent. You must designate an indiv ss of the registered agent are:	vidual or another SEURETARY FALLAHASSE
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address.	s own Registered Agent. You must designate an indiv ss of the registered agent are:	vidual or another SEURETARY FALLAHASSE
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address Michael V. Range 495 Brickell Avenue	s own Registered Agent. You must designate an indiv ss of the registered agent are:	vidual or another SEURETARY FALLAHASSE
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address Michael V. Range 495 Brickell Avenue	s own Registered Agent. You must designate an indiverse of the registered agent are: Name ue #1702	VIDUAL OF STARY OF ST

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:

"MGR" = Manager "MGRM" = Managing Member		
MGRM	Michael V. Rangel 495 Brickell Ave. #1702 Miami, FL 33131	<u>-</u> -
	TALL ATTACK	. 2011 AUG -
	SSEE, FLORIO	-5 PH 32 29
(Use attachment if necessary)		-
	e date of filing: (OPTIO	
REQUIRED SIGNATURE:		
1/2		

(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.)

Michael V. Rangel

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)