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SECRETARY OF STATE
TALLAHASSEE, FLORIO

J. SAULSBERRY EXAMINER AUG 22 2011

## DOSS | WEEKS CERTIFIED PUBLIC ACCOUNTANTS

Stephen E. Doss, CPA

Donald Robert Weeks, CPA

August 4, 2010

#### CONFIDENTIAL

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

SUBJECT: VIRTUAL AMELIA ISLAND, L.L.C.

To Whom It May Concern:

Enclosed please find the original and one copy of the executed Articles of Organization for Virtual Amelia Island, L.L.C..

Please return the stamped copy and all correspondence concerning this matter to the following:

Donald Robert Weeks
Doss Weeks, P.A.
2338 South Eighth Street
Fernandina Beach, Florida 32034

Also, enclosed please find a check in the amount of \$125.00 for the filing fee.

If you have any questions or if you need any additional information, you may call me at (904) 277-0009.

Thank you for your attention to this matter.

Sincerely.

Rob Weeks

Enclosures

SECRETARY OF STATE

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#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I – Name:

The name of the Limited Liability Company is:

VIRTUAL AMELIA ISLAND, L.L.C.

#### **ARTICLE II - Address:**

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

**Principal Office Address:** 

402 Centre Street Fernandina Beach, Florida 32034

Mailing Address:

P.O. Box 732 Fernandina Beach, Florida 32035

#### ARTICLE III - Purpose

The purpose for which this Limited Liability Company is organized is any and all lawful business.

### ARTICLE IV – Registered Agent, Registered Office, & Registered Agent's Signature:

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

Paul Wetherhill 853 Atlantic View Drive Fernandina Beach, Florida 32034

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

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

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

<u>Title:</u>	Name and Address:	
MGRM	Myweb Refresh, Inc. Paul Wetherhill, President P.O. Box 732	
	Fernandina Beach, Florida 32035	ZOII AUG 19 SECKETAR TALLAHASS
REQUIRED SIGNATURE:		IAR
EXECUTED this 10 day of Al	UGUST, 2011.	AM 9: 07 Y OF STATE EE. FLORID
X Signature of a member or an	authorized representative of a member.	7
of this document constitutes an	08.408(3), Florida Statutes, the execution affirmation under the penalties of perjury stated herein are true.)	

STATE OF FLORIDA

**COUNTY OF NASSAU** 

The foregoing instrument was acknowledged before me this 10th day of August, 2011, by Park Without II , who is personally known to me or who presented Driver Livers as identification and who did take an oath.

Name

Notary Public, State of Florida My Commission Expires:

