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SECRETARY OF STATE
TALL AHASSEE, FLORIDA

T. CLINE
OCT 18 2011
EXAMINER

LAW OFFICES

WARCHOL, MERCHANT & ROLLINGS, LLP

A FLORIDA LIMITED LIABILITY PARTNERSHIP FEIN 59-2851736

MARTHA S. WARCHOL
WILLIAM C. MERCHANT
Certified Circuit Court Mediator
Court Appointed Arbitrator
HARVEY ROLLINGS
Certified Circuit Court Mediator
MARK HOROWITZ, P.A.
CHARLES C. JONES, II, PA

1633 SOUTHEAST 47TH TERRACE CAPE CORAL, FLORIDA 33904 OR POST OFFICE BOX 100767 CAPE CORAL, FLORIDA 33910

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SENDER'S E-MAIL:

VIA FEDERAL EXPRESS

Rollings@WMRLAWOFFICE.COM

October 12, 2011

Corporate Records Bureau
Division of Corporations
Department of State
2661 Executive Center Circle West
Tallahassee, FL 32301

Attn: Corporate Division

RE: Wheelchair Assistant Group, LLC

Our File No. 34599

Dear Madam/Sir:

Enclosed herewith are the original and one (1) copy of the Articles; Organization of the above-referenced Limited Liability Corporation, together with check in the amount of \$160.00, said check allocated as follows:

\$1	100.00	Filing Fee
\$	25.00	Designation of Registered Agent
\$	30.00	Certified Copy
\$	5.00	Certificate of Status

Please return a certified copy of the Articles of Organization to this office. Thank you for your cooperation in this matter.

Yours truly,

Harvey Rollings

HR/dmp Enc.

ARTICLES OF ORGANIZATION

OF

WHEELCHAIR ASSISTANT GROUP, LLC

ARTICLE I - NAME

The name of the limited liability company shall be WHEELCHAIR ASSISTANT GROUP, LLC (the "Company").

ARTICLE II - MAILING ADDRESS AND STREET ADDRESS

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

1612 SE 28th Terrace, Unit 33 Cape Coral, FL 33904

ARTICLE III - INITIAL REGISTERED AGENT AND OFFICE

The name and street address of the initial registered agent of the Company is

Joan M. Nagel 1612 SE 28th Terrace, Unit 33 Cape Coral, FL 33904

ARTICLE IV - PURPOSE

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

ARTICLE V - MEMBERSHIP INTEREST

The Operating Agreement of the Company shall provide that a member's interest in the Company shall be evidenced by a Certificate of Membership Interest issued by the Company, and the Company shall maintain a registry of those certificates.

ARTICLE VI - MANAGEMENT OF THE COMPANY

The Company shall be managed by not less than one (1) manager (the "Manager") and is, therefore, a manager-managed company. The following is the name and address of the initial Manager who shall serve as the Manager of the Company until its successor is elected and qualified:

Joan M. Nagel 1612 SE 28th Terrace, Unit 33 Cape Coral, FL 33904

ARTICLE VII - OPERATING AGREEMENT

The Members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

IN WITNESS WHEREOF, the undersigned, being the original Member of the Company, has executed these Articles of Organization, this 14 day of October, 2011.

Joan M. Nagel

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the limited liability company is: WHEELCHAIR ASSISTANT GROUP, LLC.
 - 2. The name and address of the registered agent and office is:

Joan M. Nagel 1612 SE 28th Terrace, Unit 33 Cape Coral, FL 33904

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.

Joan M Nagel, Registered Agent

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