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SECRETARY OF STATE

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C. LEWIS

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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SDW Marketing, LLC	
Name of Limite	d Liability Company
The enclosed Articles of Organization and fee(s) are s	submitted for filing.
Please return all correspondence concerning this matter	er to the following:
Scott D Wostbrock	
	Name of Person
SDW Marketing, LLC	
	Firm/Company
7211 61st Ave N	
	Address
Saint Petersburg, FL 33709	
•	r/State and Zip Code
swostbrock1@vzw.blackberry.ne	or future annual report notification)
For further information concerning this matter, please	
Scott D Wostbrock	at (727) 432-6677
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times 130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SDW Marketing, LLC

(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:
7211 61st Ave N	7211 61st Ave N
Saint Petersburg, FL 33709	Saint Petersburg, FL 33709

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.)

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

Scott D Wostbrock

Name

7211 61st Ave N

Florida street address (P.O. Box NOT acceptable)

Saint Petersburg

133709

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)

Title:	Name and Address:	2011 OCT 28	
"MGR" = Manager	110000000000000000000000000000000000000	SECRETARY	DE STA
"MGRM" = Managing Member		TALLAHASSE	E, FLOR
MGRM	Scott D Wostbrock		
	7211 61st Ave N		
	Saint Petersburg, FL 33709		
(Use attachment if necessary)			
•	e date of filing: 10/24/11	. (OPTIO	NAL)
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CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with section 608)	er or an authorized representative of 8.408(3), Florida Statutes, the execution	f a member.	days pr
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member (In accordance with section 608 constitutes an affirmation under the constitutes and the constitutes and the constitutes an affirmation under the constitutes an affirmation under the constitutes an affirmation under the constitutes and the constitutes an affirmation under the constitutes an affirmation under the constitutes and the constitutes are the constitutes and the constitutes and the constitutes are the constitutes are the constitutes and the constitutes are the constitutes are the constitutes and the constitutes are the constitutes are the constitutes are the constitutes are the constitutes and the constitutes are the constitutes are the constitutes are th	er or an authorized representative of 8.408(3), Florida Statutes, the execution or the penalties of perjury that the facts	f a member. on of this document stated herein are true.	days pr
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of	er or an authorized representative of 8.408(3), Florida Statutes, the execution	f a member. on of this document stated herein are true.	days pr

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)