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SECRETARY OF STATE

COVER LETTER

Registration Section
Division of Corporations TO:

SUBJECT: William H. Caldwell, "LLC"
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
William Caldwell Name of Person
Firm/Company
707 S. Gulfstream Avenue, Unit #603
Address
Sarasota, FL 34236
City/State and Zip Code billcaldwell@hotmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
William Caldwell at (941) 387-6737
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee \$\bigsiz \\$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$155.00 Filing Fee & \$160.00 Filing Fee, 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:	
William H. Caldwell, "LLC"	
(Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
707 S. Gulfstream Avenue Jnit #602	707 S. Gulfstream Avenue Unit #602
Sarasota, FL 34236	Sarasota, FL 34236
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	stered Agent. You must designate an individual or another
The name and the Florida street address of the	registered agent are:
William H. Caldwell	
Name	SEE TO
707 S. Gulfstream Avenue Florida street ad	e, Unit #602 dress (P.O. Box NOT acceptable)
Sarasota,	FL 34236
City, St	and the

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)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member Manager	William H. Caldwell 707 S. Gulfstream Avenue Unit #602 Sarasota, FL 34236	
		
(Use attachment if necessary)		
	date of filing: 01/01/2012 . (OPTIONAL) e specific and cannot be more than five business days prior	
REQUIRED SIGNATURE:		

ED SIGNALI CILEN

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.)

William H. Caldwell

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)