## L12000052486

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

Special Instructions to Filing Officer:

A. LUNT

APR 18 2011

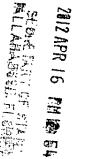
**EXAMINER** 

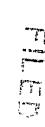
Office Use Only



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## COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	CCT: Web Vellum		
	Name of Limited Liability Company		_
The end	closed Articles of Organization and fee(s) are submitted for filing.		
Please	return all correspondence concerning this matter to the following:		
	Casey Hewlett		
	Name of Person		
	Web Vellum Firm/Company	Ezale)	2
	Firm/Company		27
	39352 8th Ave	<b>建</b> 加	APR 16 PM
		13: - C	6
	Zephyrkill FL 33542 City/State and Zip Code		- X
		EV.	ள
-	Caseyh 1900 @ gma; l. com E-mail address: (to be used for future annual report notification)	# ·	<del></del>
For furt	ther information concerning this matter, please call:		
	Name of Person at (813) 862-5057  Area Code & Daytime Telephone Number		_
	Name of Person Area Code & Daytime Telephone Numb	per	
Enclos	ed is a check for the following amount:		
\$125.00	Filing Fee \$\int \\$130.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)} \frac{\int \}{\text{Certified Copy (additional copy is enclosed)}} \int	ite of Sta I Copy	atus &
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle		
	Landingsee, 1 is 32317 2001 Laceutive Center Circle		

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<b>ARTICLE I - Name:</b> The name of the Limited Liability	Company is:	
Web Vell	Jum, LLC.	
(Must end with the wor	ds "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street add	dress of the principal office of the Limited	d Liability Company is:
Principal Office Address:	<b>Mailing Address:</b>	
39352 8th Ave Zephyshills, FL 33542	39352 8th Ave Zephyrhills, FL 33s	· · · · · · · · · · · · · · · · · · · ·
ARTICLE III - Registered Ager (The Limited Liability Company cannot serve business entity with an active Florida registr	nt, Registered Office, & Registered Age e as its own Registered Agent. You must designate an iration.)	nt's Signature
The name and the Florida street ac	ddress of the registered agent are:	6
4	Pasey Hewlett	APR 16 PM 50
<del> </del>	Name	
39	352 8th Ave	
·	Florida street address (P.O. Box NOT acceptable)	
Zeph	City, State, and Zip	
/ /	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)

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	WS:
MGR	Casey Hewlett  39352 8th Ave  Zephyshills, FL 33542	753 753 753 753 753 753 753 753 753 753
LE V: Effective date, if other than fective date is listed, the date must	the date of filing: st be specific and cannot be more than	. (OPTION
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)	the date of filing:  at be specific and cannot be more than	(OPTION five business da
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:	st be specific and cannot be more than	five business da
Fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a met of the date of filing.)  (In accordance with section constitutes an affirmation used to the days of	mber or an authorized representative of a new formation submitted in a document to the Depth of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of penalties of penalties of penalties of the penalties of pe	nember. this document ed herein are true. eartment of State
LE V: Effective date, if other than fective date is listed, the date must days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a metal of the date of filing.	mber or an authorized representative of a new formation submitted in a document to the Depth of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of perjury that the facts state of the penalties of penalties of penalties of penalties of the penalties of pe	nember. this document ed herein are true. eartment of State
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