

L12000107425

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

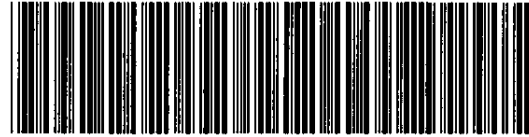
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/20/12--01015--014 **160.00

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2012 AUG 20 PM 1:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

AUG 21 2012

EXAMINER



FRANK P. TYSON, JR.

ATTORNEY AT LAW • 3507 KYOTO GARDENS DRIVE - SUITE 200 • PALM BEACH GARDENS, FLORIDA 33410

August 13, 2012

Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

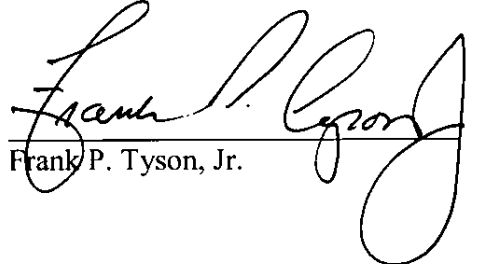
RE: Wolverines Investments, LLC

Dear Sir/Madam:

Please find enclosed the completed forms for filing Articles of Organization and our check in the amount of \$160.00 representing the filing fee, Certificate of Status and Certified Copy. Please mail to my office as indicated on the Cover Letter.

Should you have any questions, please feel free to contact my office. Thank you.

Very truly yours,



Frank P. Tyson, Jr.

Enclosures
Check

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Wolverine Investments, 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:

Frank P. Tyson, Jr.

Name of Person

Law Firm Frank P. Tyson, Jr.

Firm/Company

3507 Kyoto Gardens Drive, Suite 200

Address

Palm Beach Gardens, Florida 33410

City/State and Zip Code

Tysonlawfirm@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Frank P. Tyson, Jr.

Name of Person

at (561) 627-2300

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$160.00 Filing Fee,
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:

Wolverine Investments, 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:

138 Palm Coast Pkwy, NE
Suite 134
Palm Coast, Florida 32137

Mailing Address:

138 Palm Coast Pkwy, NE
Suite 134
Palm Coast, Florida 32137

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:

John T. Robertson

Name

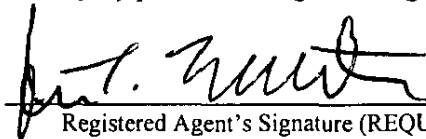
138 Palm Coast Pkwy, NE, SUITE 134

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

Palm Coast, FL 32137

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 Section 608, F.S.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

John T. Robertson
138 Palm Coast Pkwy NE, Suite 134
Palm Coast, FL 32137

MGRM

Jay J. Mahler
31 Haverhill Court
Ann Arbor, MI 48105

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

John T. Robertson

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)**

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TALLAHASSEE, FL 32399