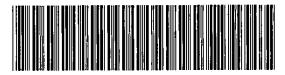
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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: AWI, 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:
Ashley H. Watson Name of Person
Firm/Company
505 Boyette Street Address
Fensacola, FL 32514  City/State and Zip Code  ashleywatson 50@ yahoo. com  E-mail address: (to be used for future annual report notification)
ashleywatson 50@ Vahoo. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee Certificate of Status  □\$155.00 Filing Fee & □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)  □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address Street/Courier Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 12, 2013

ASHLEY H. WATSON 505 BOYETTE STREET PENSACOLA, FL 32514

SUBJECT: AWI, LLC.

Ref. Number: W13000014280

We have received your document for AWI, LLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 913A00005804

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

District of Comparations D.O. DOV 6297 Tellahaggas Florida 2921

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
AWI, 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 Cor	npany is:		
Principal Office Address: Mailing Address:			
505 Bouette Street	- · · ·		
Ponsacola, FL 32514			
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signatur (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or anoth business entity with an active Florida registration.)	'e: er		
The name and the Florida street address of the registered agent are:	SECO	283	
Ashley H. Watson		MAR	_
Name	설립	9	
505 Boyette Street	E C	AH	
Florida street address (P.O. Box NOT acceptable)	<b>ES</b>		_
Pensacola FL 32514	著当	ري ري	
	~ (11)		

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

A.ATTE

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

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

"MGRM" = Managing Member	$0 \cup 1 \cup 1 \cup 1$
MGRM	17.56 ley 11. Watson 505 Bouette Street
	Pensacole FL 32514
•	
,	,
• •	
(Use attachment if necessary)	
<b>(-</b> )	

### **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.)

Ashley H. Watson
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)

Page 2 of 2