## 1300016810

(Requestor's Name)	
(Address)	700248124
(Address)	70021012
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	05/24/1301005-
(Business Entity Name)	
(Document Number)	. 5
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Wa Ma Properties, 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:	
Marih E87 hav Rojan	
Wa Ma Properties, LLC Firm/Company	
2111 Belcara CT	
For further information concerning this matter, please call:	5-7.3 maga
E-mail address: Ito belused for future annual report notification)	The second second
For further information concerning this matter, please call:	7, 5
Maria Estler Roja, at ( 305 ) 812 5833  Name of Person  at ( 305 ) Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	
□\$125.00 Filing Fee \( \text{Certificate of Status} \) □\$155.00 Filing Fee \( \text{Certified Copy} \) \( \text{Certified Copy} \) \( \text{certified Copy} \) \( \text{certified Copy} \) \( \text{additional copy is enclosed} \)	
Mailing Address  Registration Section  Division of Corporations  Street/Courier Address  Registration Section  Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
(Must end with the words "Limited Liability Company, "L.L.C.," or "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 Comparatory.	ıy is:
Principal Office Address: Mailing Address:	
2111 Be) COVA CT Same Royal Palm Boach FL. 33411	
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:    Main Eddica	נג imited t as ns of with

Page 1 of 2

(CONTINUED)

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 "MGRM" = Managing Member	Name and Address:
MGRM	Walter G. Horned III 2111 Belcara Ct Payal Palm Beach, FL. 3341)
MGRM	Maria Eather Rojas 2111 Selcara CT Royal Palm Brach, PL. 33411
(Use attachment if necessary)	A GOV
LE V: Effective date, if other than the effective date is listed, the date must	e date of filing: (OPTIONAL)  t be specific and cannot be more than five business
CLE V: Effective date, if other than the effective date is listed, the date must or 90 days after the date of filing.)  REQUIRED SIGNATURE:	
CLE V: Effective date, if other than the effective date is listed, the date must or 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a membe  (In accordance with section 608 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	t be specific and cannot be more than five business er or an authorized representative of a member.  3.408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, nation submitted in a document to the Department of State or as provided for in s.817.155, F.S.)
ELE V: Effective date, if other than the effective date is listed, the date must or 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a membe  (In accordance with section 608 constitutes an affirmation under I am aware that any false inform constitutes a third degree felony	er or an authorized representative of a member.  3.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. In the penalties of perjury that the Department of State of as provided for in s.817.155, F.S.)  WIA THE Roya.
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CLE V: Effective date, if other than the effective date is listed, the date must or 90 days after the date of filing.)  REQUIRED SIGNATURE:  Signature of a member of a may are that any false inform constitutes a third degree felony of the filing fees:  \$125.00 Filing Fee for Articles of Organ	t be specific and cannot be more than five business er or an authorized representative of a member.  3.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true, nation submitted in a document to the Department of State of as provided for in s.817.155, F.S.)  WIA ETHER ROYAL POLICE.  Therefore an authorized representative of a member.