43000087984

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Only Cate Elph Holle #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2000
Codifical Courses
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

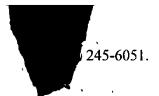




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FILED
2013 JUN 19 AN 8-52
SECRETARY OF STATE
SECRETARY OF FLORIDA



COVER LETTER

TO:

Registration Section
Division of Corporations

.cr. Werner International 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:

Artur Werner	
Name of Person	
Werner International LLC.	
Firm/Company	
5401 Bentgrass Dr. #1-201	
Address	
Sarasota FL, 34235	
City/State and Zip Code	
artur.werner@gmail.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Iwona Wajszczak

...941

685 3290

Name of Person

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



May 13, 2013

ARTUR WERNER 2ND ML 5661 OAKSHIRE AVE. SARASOTA, FL 34233

SUBJECT: WERNER INTERNATIONAL LLC

Ref. Number: W13000025291

We have received your document for WERNER INTERNATIONAL LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The effective date is not acceptable since it is not within five working days of the date of receipt.

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 513A00010355

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	(what end with the words "Lin	dead Linkilles Commons St. L.C. 2 on St. L.C.20	
		nited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II -			
The mailing ad	dress and street address	of the principal office of the Limited Liabi	ility Company is:
Principal Offi	ce Address:	Mailing Address:	
5401 Bentgrass Dr. #1-201 Sarasota FL, 34235		5401 Bentgrass Dr. #1-201	
		Sarasota FL, 34235	
(The Limited Liabil		gistered Office, & Registered Agent's S own Registered Agent. You must designate an individue	
(The Limited Liabil business entity wit	ity Company cannot serve as its than active Florida registration.) the Florida street address		
(The Limited Liabil business entity wit	ity Company cannot serve as its than active Florida registration.)	own Registered Agent. You must designate an individual of the registered agent are:	al or another
(The Limited Liabil business entity wit	ity Company cannot serve as its than active Florida registration.) the Florida street address	own Registered Agent. You must designate an individua	al or another
(The Limited Liabil business entity wit	ity Company cannot serve as its than active Florida registration.) the Florida street address	own Registered Agent. You must designate an individual of the registered agent are:	al or another
(The Limited Liabil business entity wit	ity Company cannot serve as its than active Florida registration.) the Florida street address Iwona Wajszczak 5661 Oakshire Ave.	own Registered Agent. You must designate an individual of the registered agent are:	2013 JUN 19 SECHETARY O TALLAHASSEE
(The Limited Liabil business entity wit	ity Company cannot serve as its than active Florida registration.) the Florida street address Iwona Wajszczak 5661 Oakshire Ave.	own Registered Agent. You must designate an individual of the registered agent are: Name Street address (P.O. Box NOT acceptable)	al or another SECHETY TALLAHA

(CONTINUED)

Page 1 of 2

Title:		Name and Address:
	= Manager " = Managing Memb	per
MGR		Artur Werner
		5401 Bentgrass Dr. #1-201
		Sarasota FL, 34235
	· · · · · ·	
		
•	chment if necessary)	
LE V; E	ffective date, if other	than the date of filing: (OPTIONA te must be specific and cannot be more than five busines
LE V: E ffective (or 90 da	ffective date, if other date is listed, the days after the date of RED SIGNATURE	than the date of filing: (OPTIONA ate must be specific and cannot be more than five busines filing.)
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LE V: E ffective o	Signature of (In accordance with sconstitutes an affirmal am aware that any faconstitutes a third degree for the date, if other date of the date of t	a member or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution of this document of the companion of the penalties of perjury that the facts stated herein are trible states information submitted in a document to the Department of States are felony as provided for in s.817.155, F.S.)
LE V: E ffective (or 90 da	Iffective date, if other date is listed, the date ys after the date of SEED SIGNATURE: Signature of (In accordance with seconstitutes an affirmation aware that any factors and secons to the second	than the date of filing:
LE V: E ffective of or 90 da	Signature of (In accordance with sconstitutes an affirmal am aware that any faconstitutes a third degree for the date, if other date of the date of t	than the date of filing: