15

L14000034642

(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



400256990144

02/27/14--01005--019 **125.00

B. BOSTICK

FEB 2 8 2014

EXAMINTS

COVER LETTER

SUBJECT: Wienerescue, 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: Judson Whitehorn Name of Person Firm/Company 1855 Crafton Road Address North Palm Beach, FL 33408 City/State and Zip Code judwhitehorn@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judson Whitehorn Name of Person at (_561) 531-9477 Name of Person Enclosed is a check for the following amount: S125.00 Filing Fee Certificate of Status Certificate of Status Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations Registration Section Division of Corporations	TO: Registration Section Division of Corporations		
Please return all correspondence concerning this matter to the following:	SUBJECT: Wienerescue, LLC Name of Lin	nited Liability Company	
Judson Whitehorn Name of Person	-	-	
Name of Person Firm/Company 1855 Crafton Road Address North Palm Beach, FL 33408 City/State and Zip Code judwhitehorn@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judson Whitehorn Name of Person at (_551) 531-9477 Area Code Daytime Telephone Number Enclosed is a check for the following amount: S125.00 Filing Fee Certificate of Status Certificate Copy (additional copy is enclosed) Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations	Please return all correspondence concerning this m	atter to the following:	
Firm/Company 1855 Crafton Road Address North Paim Beach, FL 33408 City/State and Zip Code judwhitehorn@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judson Whitehorn Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee	Judson Whitehorn	Nome of Degran	-
Address North Palm Beach, FL 33408 City/State and Zip Code judwhitehorn@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judson Whitehorn Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: S125.00 Filing Fee Certificate of Status Certificate Opy (additional copy is enclosed) Mailing Address Registration Section Division of Corporations Street/Courier Address Registration Section Division of Corporations		Name of Ferson	
North Palm Beach, FL 33408 City/State and Zip Code judwhitehorn@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judson Whitehorn at (561) 531-9477 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Z \$125.00 Filing Fee \$\Bigsizerian{1}{2}\$		Firm/Company	
North Palm Beach, FL 33408 City/State and Zip Code judwhitehorn@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judson Whitehorn at (561) 531-9477 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Z \$125.00 Filing Fee \$\Bigsizerian{1}{2}\$			
City/State and Zip Code judwhitehorn@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judson Whitehorn at (561) 531-9477 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Z \$125.00 Filing Fee \$ \$130.00 Filing Fee & \$ \$155.00 Filing Fee & \$ \$160.00 Filing Fee, Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Mailing Address Registration Section Division of Corporations Division of Corporations	1855 Crafton Road	Address	
City/State and Zip Code judwhitehorn@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judson Whitehorn at (561) 531-9477 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Z \$125.00 Filing Fee \$ \$130.00 Filing Fee & \$ \$155.00 Filing Fee & \$ \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address Registration Section Division of Corporations Division of Corporations			
indwhitehorn@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judson Whitehorn at (561		Situ/State and Zin Code	
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Judson Whitehorn Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: Status Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Mailing Address Registration Section Division of Corporations Enclosed is a check for the following amount: Street/Courier Address Registration Section Division of Corporations Division of Corporations	iuduhitahara@amail.aam		, ,
Judson Whitehorn at (561) 531-9477 Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee	E-mail address: (to be used	d for future annual report notification)	3
Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\text{S125.00 Filing Fee} \text{ \$\text{S130.00 Filing Fee} & \$\text{ \$\text{Certified Copy} & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{ \$\text{Certified Copy} & Certified Copy (additional copy is enclosed)} \text{ \$\text{Mailing Address} & \text{ \$\text{Registration Section} & Registration Section} & \text{ \$\text{Division of Corporations}} \tex	For further information concerning this matter, plea	ase call:	
Name of Person Area Code Daytime Telephone Number Enclosed is a check for the following amount: \$\text{S125.00 Filing Fee} \text{ \$\text{S130.00 Filing Fee} & \$\text{ \$\text{Certified Copy} & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{ \$\text{Certified Copy} & Certified Copy (additional copy is enclosed)} \text{ \$\text{Mailing Address} & \text{ \$\text{Registration Section} & Registration Section} & \text{ \$\text{Division of Corporations}} \tex			
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) ☐ \$125.00 Filing Fee & ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)			(1) (I) (I) (I)
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) ☐ \$125.00 Filing Fee & ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)			
Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address Registration Section Division of Corporations Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		_	
Registration Section Registration Section Division of Corporations Division of Corporations	5	Certified Copy Certificate of Cadditional copy is enclosed) Certified Co	of Status &
Division of Corporations Division of Corporations			
Tallahassee, FL 32314 Conton Building Catton Building 2661 Executive Center Circle	P.O. Box 6327	Clifton Building	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Wienerescue, LLC				
(Must end with the words "Lin	nited Liability Company, "L.L.C.," o	r "LLC."])	
ARTICLE II - Address:				
The mailing address and street address of the princip	nal office of the Limited Liability Co	mpany is:	ŀ	
Principal Office Address:	Mailing Address:			
1855 Crafton Road	1855 Crafton Road			
North Palm Beach, FL 33408	North Palm Beach, FL 33	408		•
ADTICUTE IN DOLLAR A	- 0 D 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15			
(The Limited Liability Company cannot serve as its	own Registered Agent. You must des		ı individi	ial or
(The Limited Liability Company cannot serve as its	own Registered Agent. You must des		individi	ual or
(The Limited Liability Company cannot serve as its another business entity with an active Florida regist	own Registered Agent. You must des ration.)		individu	aal or
ARTICLE III - Registered Agent, Registered Off (The Limited Liability Company cannot serve as its another business entity with an active Florida regist The name and the Florida street address of the regist	own Registered Agent. You must des ration.)		individu	nal or
(The Limited Liability Company cannot serve as its another business entity with an active Florida regist.) The name and the Florida street address of the regist. Judson Whitehorn	own Registered Agent. You must des ration.)		individu	nal or
(The Limited Liability Company cannot serve as its another business entity with an active Florida regist.) The name and the Florida street address of the regist. Judson Whitehorn	own Registered Agent. You must des ration.) dered agent are:		individu	nal or
(The Limited Liability Company cannot serve as its another business entity with an active Florida regist.) The name and the Florida street address of the regist. Judson Whitehorn 1855 Crafton Road	own Registered Agent. You must des ration.) tered agent are:		individu	nal or
(The Limited Liability Company cannot serve as its another business entity with an active Florida regist. The name and the Florida street address of the regist. Judson Whitehorn 1855 Crafton Road Florida street address (P.O.)	own Registered Agent. You must des ration.) tered agent are: lame Box NOT acceptable)		88 TO 34 TO 48	ual or
(The Limited Liability Company cannot serve as its another business entity with an active Florida regist.) The name and the Florida street address of the regist. Judson Whitehorn 1855 Crafton Road	own Registered Agent. You must des ration.) tered agent are:		individu	nal or

Registered Agent's Signature (REQUIRED)

CONTINUED)

Page 1 of 2

Γitle:	Name and Address:
AMBR" ≈ Authorized Member	
MGR" = Manager	
MGR	Judson Whitehorn
	1855 Crafton Road
	North Palm Beach, FL 33408
MGR	Nicole Whitehorn
	1855 Crafton Road
	North Palm Beach, FL 33408
Ise attachment if necessary)	
V: Effective date, if other than the date of the date is listed, the date must be spe	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 9
tive date is listed, the date must be spefiling.) VI: Other provisions, if any.	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 9
V: Effective date, if other than the date of tive date is listed, the date must be spefiling.) VI: Other provisions, if any.	cific and cannot be more than five business days prior to or 9
V: Effective date, if other than the date of tive date is listed, the date must be spefiling.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a\men	mper or an authorized representative of a member.
V: Effective date, if other than the date of tive date is listed, the date must be spefiling.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a mer (In accordance with section 605)	nper or an authorized representative of a member.
V: Effective date, if other than the date of tive date is listed, the date must be spefiling.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a mer (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	mper or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document: the penalties of perjury that the facts stated herein are true. Ination submitted in a document to the Department of State
V: Effective date, if other than the date of tive date is listed, the date must be spefiling.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a mer (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document; the penalties of perjury that the facts stated herein are true.
V: Effective date, if other than the date of tive date is listed, the date must be spefiling.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a mere (In accordance with section 605 constitutes an affirmation under I am aware that any false information constitutes a third degree felony	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document; the penalties of perjury that the facts stated herein are true. The penalties of perjury that the Department of State is provided for in s.817.155, F.S.)
V: Effective date, if other than the date of tive date is listed, the date must be spefiling.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a mer (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document; the penalties of perjury that the facts stated herein are true. The penalties of perjury that the Department of State is provided for in s.817.155, F.S.)
V: Effective date, if other than the date of tive date is listed, the date must be spefiling.) VI: Other provisions, if any. EQUIRED SIGNATURE: Signature of a mere (In accordance with section 605 constitutes an affirmation under I am aware that any false information constitutes a third degree felony	mber or an authorized representative of a member. 5.0203 (1) (b), Florida Statutes, the execution of this document: the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State as provided for in s.817.155, F.S.)