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2014 MAR 31 AM M: 15
SECRETARY OF STATE
TALL AN ASSET FLORIDA

APR - 2 2014 T CLINE

COVER LETTER

TO: Registration Division of C	s Section Corporations	•	-		
SUBJECT: Word F	Publishing, LLC Name of Lin	nited Liability Company	<u></u>		
	of Organization and fee(s) a spondence concerning this m	_			
Robert N	1. Hamrick	Name of Person			_
Word Pu	blishing, LLC	Firm/Company			_
P.O. Bo	x 355031	Address		SEURE AL LAF	2014 MAR
<u>Palm Co</u>	ast, FL 32135-5031	City/State and Zip Code		13887 or 14887 or	3 _ :
ru12@runbox.c	om	d for future annual report notifica	ation)	GING 13	AH III. 15
	n concerning this matter, ple			17	
Robert M. Hamrick Nan	at (at (_at (386) 264-6107 Area Code Daytime Te	lephone Number		
Enclosed is a check for \$125.00 Filing Fee	or the following amount: ☐\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Fili Certificate of Certified Co (additional cop	of Status ppy	&
	iling Address istration Section	Street/Courier Add Registration Section			•

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Word Publishing, LL0			
(N	Aust end with the words "Lim	ited Liability Company, "L.L.C.," or "LL.	C.")
ARTICLE II - Addres The mailing address and	= -	al office of the Limited Liability Company	y is:
Principal Office Addr	ess:	Mailing Address:	
2 Ferris Lane		P.O. Box 355031	<u>-</u>
	27	Polm Coast 22125 5021	
Palm Coast, FL 3213 ARTICLE III - Regist (The Limited Liability (ered Agent, Registered Offi	Palm Coast, 32135-5031 ce, & Registered Agent's Signature: wn Registered Agent. You must designate ation.)	
ARTICLE III - Regist (The Limited Liability Canother business entity) The name and the Florid	ered Agent, Registered Officompany cannot serve as its continuous with an active Florida registred a street address of the register	ce, & Registered Agent's Signature: wn Registered Agent. You must designate ation.)	72 20 20 X
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of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Robert M. Hamrick	
	2 Ferris Lane	
	Palm Coast, FL 32137	
MGR	Suzanne Hamrick	
	2 Ferris Lane	•
	Palm Coast, FL 32137	•
		•
(Use attachment if necessary)		
(Obe descentisent in necessary)		
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