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(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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2015 JAN 28 PH 12: 33
SECRETARY OF STATE

FEBOS MARRIS

COVER LETTER

TO:	Registration Division of (Section Corporations				
SUBJI	ECT: <u>Walker</u>	& Walker Worldwide LLC Name of Lin	nited Liability Company			
The en	The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please	return all corre	spondence concerning this m	atter to the following:			
	<u>Joan Wa</u>	ılker	Name of Person	·· <u> </u>		
	Firm/Company					
	5813 Harbour Circle Address					
	Cape Coral. FL 33914 City/State and Zip Code					
h	hgwalkier@yahoo.com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:						
Charles J. Fallon CPA at (732 Name of Person Are				lephone Number		
Enclos	ed is a check fo	or the following amount:				
☑ \$ 125.0	0 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)		
** *** * * * * * * * * * * * * * * * *		St				

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
Walker & Walker Worldwide 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 o	ffice of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
5813 Harbour Circle Cape Coral, FL 33914	5813 Harbour Circle Cape Coral, FL 33914				
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:					
H George Walker					
Name					
5813 Harbour Circle					
Florida street address (P.O. Box NOT acceptable)					
Cape Coral	FL 33914				
City	Zip				
	rvice of process for the above stated limited liability comp				

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 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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The name and address of each person authorized to manage and control the Limited Liability Company:

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE