

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000171162 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Account Number : 072720000036

: (407)843-4600

Phone

Fax Number

: (407)843-4444

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

<{Email Address:</pre>

FLORIDA LIMITED LIABILITY CO. WOHWONK, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

50

Electronic Filing Menu

Corporate Filing Menu

Help



15 JUL 14 AM 9:50

ARTICLES OF ORGANIZATION OF WOHWONK, LLC

SECRETARY OF STATE TALL ABASSEE, FLERENM

<u>ARTICLE I - NAME</u>

The name of this limited liability company is WOHWONK, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is 3300 University Boulevard, Suite 218, Winter Park, Florida 32792.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 N. Eola Drive, Orlando, Florida 32801, and the name of the initial registered agent of the Company at that address is Amanda F. Wilson.

ARTICLE IV - MANAGEMENT

The Company is a manager-managed limited liability company and the initial manager of the Company is Full Sail, LLC, a Florida limited liability company.

Amanda F. Wilson, Authorized Representative

ACCEPTANCE OF REGISTERED AGENT

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, Florida Statutes.