1500141198

(Re	questor's Name)			
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
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COVER LETTER

3.4

	gistration Section vision of Corporations
SUBJECT:	WRECK-A-MENDED LLC
SOBJECT.	Name of Limited Liability Company
The enclose	d Articles of Organization and fee(s) are submitted for filing.
Please return	n all correspondence concerning this matter to the following:
	ERIC C WOOD
•	Name of Person
-	Firm/Company
	3265 VALENCIA ROAD
•	Address
	VENICE FL 34293
-	City/State and Zip Code
<u>v</u>	Vreck_A_Mended@YAHOO.COM
	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
1	ERIC WOOD 941 497-4347
_	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$125.00 Fil	ing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}

Mailing Address
New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

WRECK-A-MEND (Must end		d Liability Com	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street	address of the principal o	office of the Lim	ited Liability Company is:	
<u>Princi</u>	pal Office Address:		Mailing Address:	
3990 S TAMIAMI TRAIL UNITS 1 & 4			3265 VALENCIA ROAD VENICE FL 34293	
VENICE FL 34293				
another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are ERIC C WOOD Name		d agent are:	TALLAHASSI	SECRETARY
	3265 VALENCIA ROAD			- 2 T
	Florida street address (P.O. Box NOT acceptable) VENICE FL 34293			
	VENICE	FL	34293 👸	
	City	State	Zip	
place designated in this certificate further agree to comply with the p	e, I hereby accept the app provisions of all statutes r bligations of my position	pointment as reg elating to the pr as registered as	r the above stated limited liability compositered agent and agree to act in this cap oper and complete performance of my disent as provided for in Chapter 605, F.S	pacity. I uties, and I

Page 1 of 2

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" =	- Authorized Member	Name and Address:		
"MGR" = 1				
AMBR	· ianagei	ERIC C WOOD		
		3265 VALENCIA ROAD		
		VENICE FL 34293		
AMBR		PATRICK M LEIBMANN		
		948 SHASTA ROAD		
		VENICE FL 34293		
(Use attach	ment if necessary)			
(If an effective date the date of filing.) <u>Note:</u> If the date in:	is listed, the date must be specific a	ng: AUGUST 1, 2015 Indication cannot be more than five business days prior to or 90 days after e applicable statutory filing requirements, this date will not be listed as e's records.		
ARTICLE VI: Other	r provisions, if any.			
REQUIRE	Signature of a member	or an authorized representative of a member.		
	I am aware that any false inform	nation submitted in a document to the Department of State y as provided for in s.817.155, F.S.		

Filing Fees:

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

Eric C. Wexel

Typed or printed name of signee

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)