

L1500014321

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H15000227728 3)))



H150002277283ABC1

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 : KOUTOULAS & RELIS, LLC
Account Number : I200700000005
Phone : (954) 332-1345
Fax Number : (954) 332-1346

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

Email Address: info@krcpas.us

FLORIDA LIMITED LIABILITY CO.
WMK Design, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

15 SEP 22 PM 1:37

15 SEP 22 AM 11:44
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Fax Audit #: H15000227728 3

**ARTICLES OF ORGANIZATION
OF
WMK Design, LLC**

The undersigned, acting as organizer of WMK Design, LLC, a company organized and created pursuant to Chapter 605, Florida Statutes hereby adopt the following Articles of Organization for said Florida Limited Liability Company:

ARTICLE I

The name of the limited liability company shall be:

WMK Design, LLC

ARTICLE II

The mailing and street address of the principal office of the limited liability company is:

1141 Holland Drive
Suite 23
Boca Raton, FL 33487

ARTICLE III

The name and the Florida street address of the registered agent are:

William Lapis
1141 Holland Drive Suite 23
Boca Raton, FL 33487

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.


William Lapis -Registered Agent

Prepared by:
Koutoulas & Relis, LLC
1776 N Pine Island Road. Suite 316
Plantation, FL 33322
Phone: (954) 332-1345
Fax: (954) 332-1346

Fax Audit #: H15000227728 3

FILED
15 SEP 22 AM 11:44
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Fax Audit #: H15000227728 3

ARTICLE IV.

This limited liability company is to be managed by two managers. The name and address of each Manager is as follows:

William Lapis - Manager
1141 Holland Drive
Suite 23
Boca Raton, FL 33487

Michael Raskin - Manager
1141 Holland Drive
Suite 23
Boca Raton, FL 333487

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties or perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817-155, F.S.


William Lapis - Manager

*Signature of Member or authorized representative of a member

FILED
15 SEP 22 AM 11:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Prepared by:
Koutoulas & Relis, LLC
1776 N Pine Island Road, Suite 316
Plantation, FL 33322
Phone: (954) 332-1345
Fax: (954) 332-1346

Fax Audit #: H15000227728 3