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SECRETARY OF STATE DIVISION OF CORPORATIONS

## COVER LETTER

**?**\*-

TO: Registration Section Division of Corporations		
SUBJECT: Wildfige Promotions LLC  Name of Limited Liability Company		
Name of Limited Liability Company		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Ryan Watson Name of Person		
Name of Person		
Wildfire Promotions LLC		
Firm/Company		
132 FAIRVIEW EAST		
Address		
T-045 F1 22469		
TEQUESTA, FL. 33469 City/State and Zip Code		
WATSONRMM @ AOL. COM		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
RYAN WATSON at (561 ) 818-3277		
Name of Person Area Code Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}	Status &	
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY WILDFIRE PROMOTIONS LLC

**ARTICLE I – Name:** The name of the limited liability company is Wildfire Promotions

**ARTICLE II – Address:** The mailing address and street address of the principal office of the Limited Liability Company is: 132 Fairview East, Tequesta, Florida, 33469.

ARTICLE III - Registered Agent, Registered Office & Registered Agent's

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

Ryan Watson 132 Fairview East Tequesta, FL. 33469

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

ARTICLE IV – Management:

The Limited Liability Company is to be a manager-managed company.

Title:

Name and Address:

**MGR** 

Ryan Watson, 132 Fairview East Tequesta, FL. 33469.

ARTICLE V- Effective Date: 3/23/16.

**REQUIRED SIGNATURE:** 

Signature of a Member of an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1)(b), Florida Statutes. 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.

Ryan Warson
Typed or Printed name of signee