

Florida Department of State
Division of Corporations
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LI600209051

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To: Division of Corporations
Fax Number : (850) 617-6381

From: Account Name : GERALD WEINBERG, P.C.
Account Number : I20030000043
Phone : (800) 342-9356
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TALLAHASSEE, FLORIDA
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
WE ARE ACCEPTANCE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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11-16
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WE ARE ACCEPTANCE 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 office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

WE ARE ACCEPTANCE LLC

731 7TH ST N

SAINT PETERSBURG, FLORIDA 33701

WE ARE ACCEPTANCE LLC

C/O PADELL BUSINESS 213 WEST 35TH ST #002A

NEW YORK, NY 10001

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:

CHRISTIAN MCALHANEY

Name

731 7TH ST N

Florida street address (P.O. Box NOT acceptable)

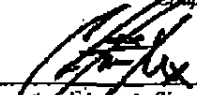
SAINT PETERSBURG

City

FL 33701

Zip

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.

X 
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

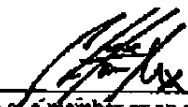
<u>Title:</u>	<u>Name and Address:</u>
"AMBR" = Authorized Member	
"MGR" = Manager	
<u>AMBR</u>	<u>CHRISTIAN MCALHANEY</u> <u>781 7TH ST N</u> <u>SAINT PETERSBURGH, FL 33701</u>
<u>AMBR</u>	<u>RYAN ZWIEPELHOFER</u> <u>1723 Elizabeth Ave</u> <u>Bremerton, WA 98337</u>
<u>AMBR</u>	<u>Garrett Lunceford</u> <u>1121 17th Ave. #203</u> <u>Seattle, WA 98122</u>
<u>AMBR</u>	<u>Kaylan Cloyd</u> <u>18338 198th St E</u> <u>Bonney Lake, WA 98301</u>

(Use attachment if necessary) Article IV -attached

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

X 

Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of 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.)

Christian McAlhane
Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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ARTICLE IV- continued

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Jason Vena

3068 NE Harrison Drive

Issaquah, WA 98029

X N/A

X N/A

X N/A

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