

L17000048238

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

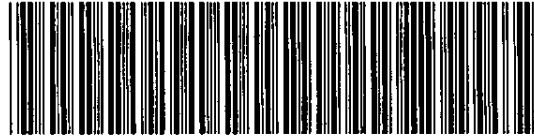
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400296040514

03/02/17--01020--015 **156.00

FILED
17 MAR -2 PM 2:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Handwritten signature 03/06/17

Wayside Property Solution & Associates LLC.

Eashwayne Haughton

3601 NW 14 Court

Lauderhill FL 33311

Telephone: 954-857-4809

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WAYSIDE PROPERTY SOLUTIONS & ASSOCIATES 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:

3601 NW 14TH COURT
LAUDERHILL FL 33311

Mailing Address:

3601 NW 14TH COURT
LAUDERHILL FL 33311

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:

ADVANCE TRAINING & SECURITY AGENCY INC
Name

3500 NORTH STATE RD 7 SUITE 212-3
Florida street address (P.O. Box **NOT** acceptable)

LAUDERDALE LAKES FL 33319
City State 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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
17 MAR -2 PM 2:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

EASHWAYNE HAUGHTON
3601 NW 14TH COURT
LANDER HILL FL 33311

TAMESHA RIGG HAUGHTON
3601 NW 14TH COURT
LANDER HILL FL 33311

(Use attachment if necessary)

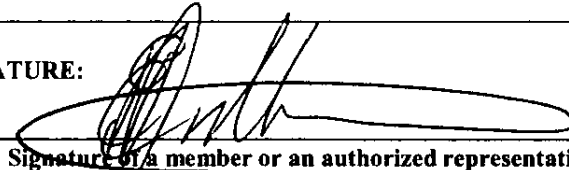
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or 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.

Eashwayne Haughton
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)

FILED
17 MAR -2 PM 2:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA