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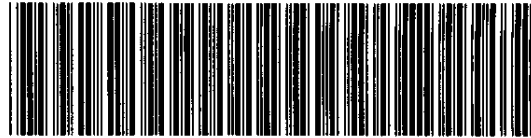
(Business Entity Name)

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FILED
17 APR 24 AM 11:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

4/24/17

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: WYATT REELEY, LLC
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:

DIANA J. REELEY
Name of Person

WYATT REELEY, LLC
Firm/Company

236 HAZELTINE DR.,
Address

DEBARY, FL 32713
City/State and Zip Code

wyattndiane@reeleyworks.foryou.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DIANA J. REELEY at (407) 867-0676
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & 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

OF

WYATT REELEY, LLC

FILED
17 APR 24 AM 11:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I

NAME

The name of the Limited Liability Company is **WYATT REELEY, LLC.**

ARTICLE II

ADDRESS

The mailing address of the Limited Liability Company's principal office is 236 Hazeltine Dr., DeBary, FL 32713.

The street address of the Limited Liability Company's principal office is 236 Hazeltine Dr., DeBary, FL 32713.

ARTICLE III

DURATION AND PURPOSE

The period of duration for the Limited Liability Company shall be perpetual. The Limited Liability Company will be involved in the sales and management of real property and all other lawful business under the laws of Florida.

ARTICLE IV

MANAGEMENT

☛ The managing members of this Limited Liability Company are Wyatt A. Reeley and Diana J. Reeley as are specified under the Operating Agreement and shall be authorized to execute any and all reports, forms, instruments, document, papers, writings, agreements, and

contracts, including but not limited to deeds, bills of sale, assignments, leases, promissory notes, mortgages, and security agreements and any other type or form of document by which property or property rights of the Company are transferred or encumbered, or by which debts and obligations of the Company are created, incurred, or evidenced, that are necessary, appropriate, or beneficial to carry out or further those decisions or actions.

In accordance with Chapter 605, Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.


Authorized Representative

ARTICLE V

Registered Agent

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

UNDER THE PROVISIONS OF F.S. 605.0201, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the limited liability company is **WYATT REELEY, LLC.**

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

Diana J. Reeley
236 Hazeltine Dr.
DeBary, FL 32713

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, Florida Statutes.

WYATT REELEY, LLC

Diana J. Reeley
DIANA J. REELEY, Registered
Agent

STATE OF FLORIDA
COUNTY OF VOLUSIA

The foregoing instrument was acknowledged before me this 12th day of April, 2017, by
DIANA J. REELEY, who is personally known to me or who produced
a Florida Driver's License as identification and who did not take an oath.

Gary S. Wright
Notary Public

Commission No.
My Commission Expires:

Required Signature:

Diana J. Reeley
Signature of Authorized Member



This document is executed in accordance with Section 605.0203(1)(6), 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 Section 817.155, Florida Statutes.

DIANA J. REELEY
Typed or printed name of signee