

L20000379130

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

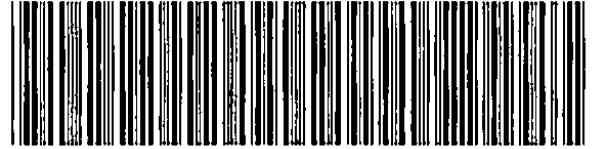
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W20000127011

Office Use Only



600353950986

10/20/20--01023--018 **125.0

2020 DEC -2 PM 3:45

FILED

COVER LETTER

TO: New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
(850) 245-6052

2020 DEC -2 PM 3:45

SUBJECT: Enterprises G and W, 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:

Wendy D. Reinhardt

Name of Person

1019 Orca Court

Address

Holiday, FL 34691

City/ State and Zip

Wendyr1454@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wendy D. Reinhardt

at (727)

455-2602

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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is: Enterprises G and W, LLC

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:


Enterprises G and W, LLC
1019 Orca Court
Holiday, FL 34691

**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE**

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

Wendy D. Reinhardt
1019 Orca Court
Holiday, Florida 34691

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..


Wendy D. Reinhardt,
Registered Agent

ARTICLE IV- MANAGERS OR MANAGING MEMBERS

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

Title:
"MGR" = Manager
"MGMR" = Managing Member

Name and Address:

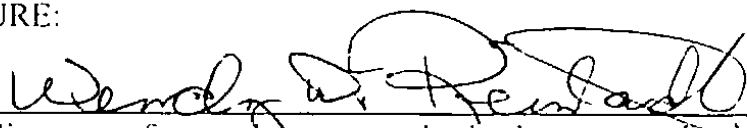
MGMR

Wendy D. Reinhardt
1019 Orca Court
Holiday, FL 34691

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be upon filing.

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.

Wendy D. Reinhardt

Typed or printed name of signee