

L210000447349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

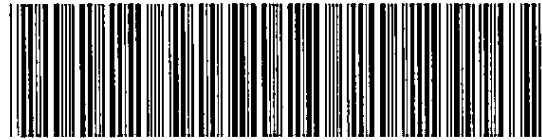
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600374760376

10/12/21--01057--009 **125.00

FILED
2021 OCT 12 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FL

✓

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: W288 LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven J Minessale
Name of Person
Firm/Company
4901 SW 192nd Ter
Address
Southwest Ranches FL 33332
City/State and Zip Code
sjminess@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven J Minessale 608 345-8394
at ()
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

SECRET
TALLAHASSEE, FL

2021 OCT 12 PM 1:26

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

W288 LLC

(Must contain 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:

4901 SW 192nd Ter
Southwest Ranches, FL 33332

4901 SW 192nd Ter
Southwest Ranches, FL 33332

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:

Steven J Minessale

Name

4901 SW 192nd Ter

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

<u>Southwest Ranches</u>	<u>FL</u>	<u>33332</u>
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.

Steven J Minessale
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
2021 OCT 12 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR _____

Steven J Minessale as Trustee of the Steven J Minessale
Revocable Trust U/A dated 02/19/2014
4901 SW 192nd Ter. Southwest Ranches, FL 33332

AMBR _____

James M Minessale
4901 SW 192nd Ter. Southwest Ranches, FL 33332

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 01-01-22 (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:

Steven J Minessale

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.

Steven J Minessale

Typed or printed name of signer

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)

2021 OCT 12 PM 1:26
SECRETARY OF STATE
TALLAHASSEE, FL

FILED