# Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000001815 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

\*\*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. G. WILBUR ENTERPRISES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help



#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

G. Wilbur Enterprises, LLC

(Must end with the words "Lumited 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:

151 107th Avenue, Suite 10	151 107th Avenue, Suite 10
Treasure Island, FL 33706	Treasure Island, FL 33706

### 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:

Gar	y Wilbur	
	Name	
151 10	7th Avenue, Suite	10
Florida street address (	P.O. Box <u>XOT</u> a	cceptable)
Treasure Island	FIL	33706
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..

Gary Shilper

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

23 JM - 3 유타2: 35

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Gary Wilbur
	151 107th Avenue, Suite 10
	Treasure Island, FI, 33706
	<del></del>
fective date is listed, the date must be spe	of filing: 12/28/2022 (OPTIONAL) cific and cannot be more than five business days prior to or 90
ffective date is listed, the date must be spe e of filing.) If the date inserted in this block does not me nument's effective date on the Department of CLE VI: Other provisions, if any.	cific and cannot be more than five business days prior to or 90 eet the applicable statutory filing requirements, this date will not
effective date is listed, the date must be spe e of filing.) If the date inserted in this block does not meanment's effective date on the Department of CLE VI: Other provisions, if any.	cific and cannot be more than five business days prior to or 90 eet the applicable statutory filing requirements, this date will not
effective date is listed, the date must be specie of filing.)  If the date inserted in this block does not meanment's effective date on the Department of CLE VI: Other provisions, if any. Any and all business purpose.  RECURED SIGNATURE:	ecific and cannot be more than five business days prior to or 90 ect the applicable statutory filing requirements, this date will not if State's records.
ffective date is listed, the date must be speed of filing.)  If the date inserted in this block does not meanment's effective date on the Department of the CLE VI: Other provisions, if any.  Any and all business purpose.  REOURED SIGNATURE:  Signature of a menutation of the content of the c	ect the applicable statutory filing requirements, this date will not if State's records.  The property of a member of a member of a member of an authorized representative of a member. Figure 1 and 1 accordance with section 605.0203 (1) (b). Florida Signites, following a regulated for in a S17.155. ES
ffective date is listed, the date must be speed of filing.)  If the date inserted in this block does not meanment's effective date on the Department of the CLE VI: Other provisions, if any.  Any and all business purpose.  REOURED SIGNATURE:  Signature of a menutation of the content of the c	ect the applicable statutory filing requirements, this date will not if State's records.  The property of a member. The property of a member of an accordance with section 605.0203 (1) (b). Florida Signates, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.  Gary Wilbur
ffective date is listed, the date must be speed of filing.)  If the date inserted in this block does not mument's effective date on the Department of LEVI: Other provisions, if any.  Any and all business purpose.  REOURED SIGNATURE:  Signature of a menument of a manual manua	ectific and cannot be more than five business days prior to or 90 ect the applicable statutory filing requirements, this date will not if State's records.  The property of a nauthorized representative of a member. The different accordance with section 605.0203 (1) (b). Florida Signites, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
ffective date is listed, the date must be speed of filing.)  If the date inserted in this block does not mument's effective date on the Department of LE VI: Other provisions, if any.  Any and all business purpose.  REOURED SIGNATURE:  Signature of a mentile document is executed an aware that any false.	ect the applicable statutory filing requirements, this date will not if State's records.  The property of a member of a member of an accordance with section 605.0203 (1) (b). Florida Statutes information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.  Gary Wilbur
ffective date is listed, the date must be speed of filing.)  If the date inserted in this block does not mument's effective date on the Department of LE VI: Other provisions, if any.  Any and all business purpose.  REQUIRED SIGNATURE:  Signature of a mer This document is executed any aware that any false constitutes a third degree	ect the applicable statutory filing requirements, this date will not of State's records.  The state's records of the section 605.0203 (1) (b). Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.  Gary Wilbur  Typed or printed name of signee