

# L23000149726

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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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PICK-UP

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MAIL

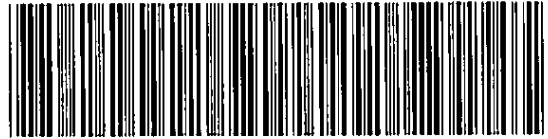
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(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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CLERK OF STATE  
TALLAHASSEE, FL

OK

KALANDER & NASH, LTD.

ATTORNEYS AT LAW

JONATHAN V. KALANDER\*  
DAMIAN NASH\* ✧ ✧ □  
EVERETT A. PETRONIO, JR.  
JUDITH A. JAMESON

\*ALSO ADMITTED IN MASSACHUSETTS  
✧ ALSO ADMITTED IN NEW YORK  
✧ ALSO ADMITTED IN FLORIDA  
□ ALSO ADMITTED IN CONNECTICUT

March 3, 2023

**CERTIFIED MAIL R.R.R**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

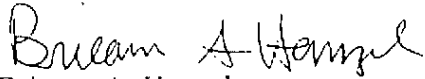
RE: W. Darling Management Services, LLC

Dear Sir/Madam.

Please find enclosed with this letter Articles of Organization for filing, along with a check in the amount of \$125.00 to cover the filing fee.

If you have any questions, please feel free to contact me at (401) 737-9720 ext. 209

Yours Truly,



Bricana A. Hanzel  
Paralegal

Enclosures

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TALLAHASSEE, FL

**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** W. Darling Management Services, 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:

Damian Nash, Esq.

Name of Person

Kalander & Shaw, Ltd.

Firm/Company

931 Jefferson Boulevard, Suite 2004

Address

Warwick, RI 02886

City/State and Zip Code

dnash@kalanderlaw.com

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

For further information concerning this matter, please call:

Damian Nash, Esq. 401 737-9720  
Name of Person at ( ) Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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2023 MAR 10 AM 4:33  
TALLAHASSEE, FL  
STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

W. Darling Management Services, 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:

2800 S Ocean Blvd, #23H  
Boca Raton, FL 33432

931 Jefferson Boulevard, Suite 2004  
Warwick, RI 02886

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:

Jefferey Carney, CPA

Name

5121 Castello Drive, Suite 1

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

Naples

FL

34103

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)

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2023 MAR 10 AM 4:33  
CLERK OF CIRCUIT COURT  
PALM BEACH COUNTY  
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:**

MGR \_\_\_\_\_

Wayne Darling  
2800 S Ocean Blvd, #2311  
Boca Raton, FL 33432

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(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.



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)

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2023 MAR 10 AM 4:36  
TALLAHASSEE, FL  
DEPARTMENT OF STATE