

L96000001112

TRANSMITTAL LETTER  
FOR FLORIDA LIMITED LIABILITY COMPANY

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

800001980208---5  
-10/18/96--01001--001  
\*\*\*\*\*293.75 \*\*\*\*\*293.75

SUBJECT: WETJEN ASSOCIATES, L.C.  
(Proposed limited liability company name - must include suffix)

Enclosed is an original and one (1) copy of the articles of organization and a check for :

☐ \$285.00  
Filing Fee  
& Registered  
Agent designation

☒ \$293.75  
Filing Fee,  
Registered Agent  
Designation &  
Certificate

☐ \$337.50  
Filing Fee,  
Registered Agent  
Designation &  
Certified Copy

☐ \$346.25  
Filing Fee,  
Registered Agent  
Designation,  
Certified Copy &  
Certificate

FROM: ROLF G. WETJEN  
Name (Printed or typed)

30218 FAIRWAY DRIVE  
Address

WESLEY CHAPEL, FL, 33543  
City, State & Zip

813-991-0240  
Daytime Telephone number

FILED  
96 OCT 18 AM 10:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOTE: Please provide the original and one copy of the articles.

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

WETJEN ASSOCIATES, L.C.

**ARTICLE II - Address:**

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

30218 FAIRWAY DRIVE  
WESLEY CHAPEL, FL 33543

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

TEN (10) YEARS

**ARTICLE IV - Management:**

(check and complete the appropriate statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

ROLF G. WETJEN  
30218 FAIRWAY DRIVE  
WESLEY CHAPEL, FL 33543

GLORIA GUZOBAD WETJEN  
30218 FAIRWAY DRIVE  
WESLEY CHAPEL, FL 33543

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TALLAHASSEE, FLORIDA

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of \_\_\_\_\_

WETSEN ASSOCIATES, L.C. \_\_\_\_\_ deposes and says:

- 1) the above named limited liability company has at least two members
- 2) the total amount of cash contributed by the member(s) is \$ 100-
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ 10,470.  
A description of the property is attached and made a part hereto.
- 4) the amount of cash or property anticipated to be contributed by member(s) is \$ \_\_\_\_\_
- 5) the total amount of 2, 3, and 4 is \$ 10,570

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member.  
(In accordance with section 608.408(3), Florida Statutes, the  
execution of this affidavit constitutes an affirmation under the  
penalties of perjury that the facts stated herein are true.)

# PROPERTY CONTRIBUTED BY MEMBERS

Computer	\$ 3,480
Computer Printer	500
Desk	420
Credenza	1,325
Desk Chair	1,400
Desk Lamp	345
Fax Machine	350
Oriental Rug	2,000
Sofa	200
Bookcases (2)	200
Floor Lamp	200
Shredder	50
	<hr/>
	\$ 10,470

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

WETJEN ASSOCIATES, L.C.

2. The name and address of the registered agent and office is:

ROLF G. WETJEN  
(Name)

30218 FAIRWAY DRIVE  
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

WESLEY CHAPEL, FL 335  
(City/State/Zip)

FILED  
OCT 18 AM 10:27  
CLERK OF STATE  
TALLAHASSEE, FLORIDA


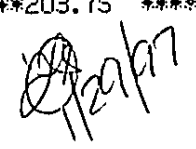
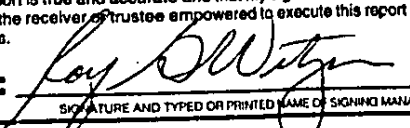
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.*

*Roy B. Wetjen*  
(Signature)

10/4/96  
(Date)

**Filing Fee: \$ 35 for Designation of Registered Agent**

**FILE NOW: Fee after May 1, will be \$588.75**

<b>LIMITED LIABILITY COMPANY</b> <b>ANNUAL REPORT</b> <b>1997</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State <b>DIVISION OF CORPORATIONS</b>		<b>FILED</b> 07 JAN 29 PM 4:19 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
<b>FILING FEE</b> <b>\$ 203.75</b>		Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>			
<b>1. Name and Mailing Address of Limited Liability Company</b>  <b>WETJEN ASSOCIATES, L.C.</b> <b>30218 FAIRWAY DR.</b> <b>WESLEY CHAPEL FL 33543</b>		<b>DOCUMENT #</b> L96000001112  <b>1a. Principal Place of Business Address</b>  <b>30218 FAIRWAY DR.</b> <b>WESLEY CHAPEL FL 33543</b>			
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.					
<b>2. Principal Place of Business</b>  Suite, Apt. #, etc.  City & State  Zip      Country		<b>2a. Mailing Address</b>  Suite, Apt. #, etc.  City & State  Zip      Country		<b>3. Date Organized or Qualified</b> 0/18/1996  <b>4. FEI Number</b> 59-3407751  <b>5. Date of Last Report</b> NA  <b>6. Certificate of Status Desired</b> <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
<b>7. Name and Address of Current Registered Agent</b>  <b>WETJEN, ROLF G</b> <b>30218 FAIRWAY DR.</b> <b>WESLEY CHAPEL FL 33543</b>			<b>8. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, etc.  City      Zip Code		
<b>9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.</b>					
<b>SIGNATURE</b> _____ <small>(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)</small>			<b>DATE</b> _____		
<b>10. Title</b> <b>Managing Members/Managers</b>		<b>Business Street Address</b>		<b>City, State and Zip Code</b>	
MGRM WETJEN, ROLF G		30218 FAIRWAY DR.		WESLEY CHAPEL FL	
MGRM WETJEN, GLORIA G		30218 FAIRWAY DR.		WESLEY CHAPEL FL	
				700002074007--5 -01/30/97--01076--007 ****203.75 ****203.75 	
<b>11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.</b>					
<b>SIGNATURE:</b> 		ROLF G. WETJEN		1/26/97 813.991-0240	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER</small>		<small>Date</small>		<small>Daytime Phone #</small>	