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TRANSMITTAL LETTER
FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 FEB 10 PM 3:46

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

700002426847--9
-02/10/98--01070--001
****293.75 ****293.75

SUBJECT: WC HUFF VENTURES, 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: ROBERT B. HILIS
Name (Printed or typed)

1304 Summer Place
Address

NAPLES FL 34109
City, State & Zip

941-513-0380
Daytime Telephone number

Name Availability	KWM
Document Examiner	KWM
Director	K M
Secretary	K M
Knowledge	K M
P. Verifier	K M

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

The name of the Limited Liability Company is:

WC HUFF VENTURES, L.C.

ARTICLE II - Address:

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

1304 SUMMER PLACE, NAPLES, FL 34109

ARTICLE III - Duration:

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

AN EVENT OF DISSOLUTION UNDER FLORIDA LAW INVOLVING ANY MEMBER WILL CAUSE THE L.C. TO DISSOLVE.

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:

ROBERT B. HILLS
1304 SUMMER PLACE
NAPLES, FL 34109

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

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The undersigned member or authorized representative of a member of _____

WC HUFF VENTURES, L.C. _____ deposits 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 \$ -
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ - .
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 \$ 25,000.-
- 5) the total amount of 2, 3, and 4 is \$ 25,000.-



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.)

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

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98 FEB 10 PM 3:47

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, 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: _____

WC HUFF VENTURES, L.C.

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

ROBERT B. HILLS
(NAME)

1304 SUMMER PLACE
(P.O. Box NOT ACCEPTABLE)

NAPLES, FL 34109
(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.

Robert B. Hills
(SIGNATURE)

1/12/98
(DATE)