

L990000002694

Steve Wilson

403 Crabtree Way

Orlando, Fl.

32835-1913

Phone: 407-296-0307

100002869511--1
-05/10/99--01107--009
****346.25 ****346.25

Steve Wilson GAVE
AUTHORIZATION BY PHONE TO
CORRECT Articles + Affidavit
DATE 5-12-99
DOC. EXAM MAJ

Name	Availability
Document	Examiner
Updater	Updater
Verifier	Verifier
Acknowledgement	
P. Verifier	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAY 10 AM 11:10

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Steve Wilson Enterprises, L.L.C.

ARTICLE II - Address:

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

403 Crabtree Way
Orlando, Florida 32835-1913

ARTICLE III - Duration:

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

perpetual

ARTICLE IV - Management:

(Check the appropriate box and complete the 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:

Steve Wilson
403 Crabtree Way
Orlando, Fl. 32835-1913

- ☐ 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:

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 MAY 10 AM 11:10

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

Additional members can be admitted only upon approval of manager Steve Wilson, and the term would continue until such time as the manager deemed reasonable to dissolve all or individual memberships. Conditions to admit members, may vary and are to be determined at the →

(cont): time of the admission.

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: The right shall be given in accordance with Article VI to continue as "Steve Wilson Enterprises, LLC". IF ~~within~~ the remaining members, does not include the acting manager Steve Wilson, then a new manager shall be elected. Manager Steve Wilson is hereby granted voting rights even in his absence. In the event he is unable to physically participate in such vote, a standing vote first for Denise Wilson (his wife) and second for Niko Wilson (his son) shall be recognized. If the new manager is not Denise Wilson or Niko Wilson, then the new manager is hereby required to provide both Denise Wilson and Niko Wilson with the Lifestyle for which they have become accustomed.

ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of _____
Steve Wilson Enterprises, L.L.C. certifies:

- 1) the above named limited liability company has at least one member; yes
- 2) the total amount of cash contributed by the member(s) is \$ 500.00 ;
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$ -0- ;
(A description of the property is attached and made a part hereto.); and
- 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is \$ 500.00 .

Steve Wilson

Signature of a member or an 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.)

Steve Wilson

Typed or printed name of signee

Filing Fee: \$250.00 for Articles and Affidavit

**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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Steve Wilson Enterprises, LLC.

2. The name and the Florida street address of the registered agent are:

Steve Wilson

NAME

403 Crabtree Way

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

Orlando

FL

32835-1913

CITY, STATE AND 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.

Steve Wilson

SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent