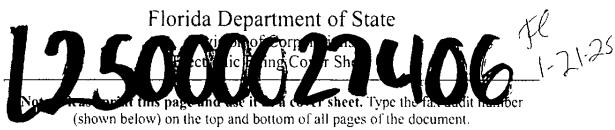
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Division of Corporations



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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 : JECK, HARRIS, RAYNOR & JONES, P.A.

Account Number : I20000000210 : (561)746-1002

Fax Number : (561)775-0270

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: szaloom@jhrjpa.com

FLORIDA LIMITED LIABILITY CO.

Dr. Wayne Dyer Trademark LLC

Certificate of Status	0
Certified Copy	()
Page Count	02
Estimated Charge	\$125.00

Corporate Filing Menu

Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Dr. Wayne Dyer Trademark 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:
4850 NW 24th Ave	4950 NW 24th Ave
Boca Raton, FL 33431	Boca Raton, FL 33431

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:

Jeck, Harris, Raynor & Jones, P.A.

Name

790 Juno Ocean Walk, Ste. 600

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

Juno Beach FL 33408

City State Zip --,

Having been named as registered agent and to accept service of process for the above stated limited liability company of 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..

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"MGR" - Manager MGR	Marcelene L. Dver	
7.00	4580 NW 24th Ave Boca Raton, FL 33431	
	EXTRACTION DE LA COMPANIE DE LA COMP	
		
(Use attachment if necessary) ICLE V: Effective date, if other than the o	date of filing: (OPTIONAL)	•
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\$ 5.00 Certificate of Status (Optional)