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Florida Department of State  
Division of Corporations  
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DIVISION OF CORPORATION

To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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**LIMITED LIABILITY COMPANY**

**w.s. development group, llc**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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

**FOR**

**W.S. DEVELOPMENT GROUP, LLC**

**ARTICLE I - Name**

The name of the Limited Liability Company is: W.S. DEVELOPMENT GROUP, LLC.

**ARTICLE II - Address**

The mailing address and street address of the principal office of the Limited Liability Company is: 5600 N.W. 102 Avenue, Suite H, Sunrise, Florida 33351

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature**

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

MICHAEL SCHATZBERG

Name

1826 N.W. 124 Way

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

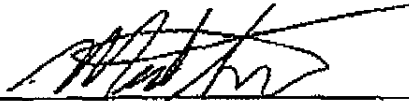
Coral Springs, Florida 33071

City, State, and Zip

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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 608, F.S.



**MICHAEL SCHATZBERG**

Registered Agent's Signature

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**ARTICLE IV - Managers or Managing Members:**

The name and address of each Manager or Managing Member is as follows:

MICHAEL SCHATZBERG

1826 N.W. 124 Way  
Coral Springs, Florida 33071

JOHN WATSON

5600 N.W. 102 Avenue  
Suite H  
Sunrise, Florida 33351



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MICHAEL SCHATZBERG

Typed or printed name of signer

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