Laacoo 17998

(Requestor's Name) (Address) (Address)	300078319823		
(City/State/Zip/Phone #) PICK-UP WAIT MAIL			
(Business Entity Name)	08/07/0601044010 **125.00		
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	EFFECTIVE DATE		

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COVER LETTER

TO: Registration Sec Division of Cor			
SUBJECT: WCC E	NGINEERING, LLC		
	(Name of Limited	d Liability Company)	
The enclosed Articles of	Organization and fee(s) are so	ubmitted for filing.	
Please return all correspo	ondence concerning this matte	er to the following:	
JEFFREY [D. SCHAFFER		
	(1	Name of Person)	
WAGNER (CONSTRUCTION C	OMPANY, LLC	
	(Firm/Company)	
1903 GRE	ENLEAF LANE		
		(Address)	
LEESBUR	G, FLORIDA 3474	18	
	(City	/State and Zip Code)	
For further information of	concerning this matter, please	call:	
JEFFREY D. SCH	HAFFER	at (352) 728-2221	
(Name	of Person)	(Area Code & Daytime Te	lephone Number)
Enclosed is a check for	r the following amount:	·	
▼ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	06 TAL

FILED

6 AUG -7 PH 2: 03

ECRETARY OF STATE
LAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
WCC ENGINEERING, LLC	
(Must end with the words "Limited Liability Company, "Limit	ed Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
	rincipal office of the Limited Liability Company is:
	morphi office of the Emilion Bluently Company is.
Principal Office Address:	Mailing Address:
1002 ODEENI FAE LANE	4000 OBEEN EAST AND
1903 GREENLEAF LANE	1903 GREENLEAF LANE
LEESBURG, FLORIDA 34748	LEESBURG, FLORIDA 34748
(The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.) The name and the Florida street address of the r JEFFREY D. SCHAFFER	
Name	
1903 GREENLEAF LANE	
	dress (P.O. Box NOT acceptable)
LEESBURG	• • •
City, State, a	FL 34748
City, State, a	and zap

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

PILED

06 AUG - 7 PH 2: 03

SECRETARY OF STATE ANASSEE, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>		Name and Address:	
"MGR" = Manag			
"MGRM" = Man	aging Member		
MGRM		JEFFREY D. SCHAFFER	
		1903 GREENLEAF LANE	
		LEESBURG, FLORIDA 34748	
			
			
	date, if other than the	e date of filing: AUGUST 1, 2006	
LE V: Effective	date, if other than the	e date of filing: AUGUST 1, 2006 specific and cannot be more tha	
LE V: Effective of fective date is list days after the da	date, if other than the ted, the date must bute of filing.)		
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LE V: Effective of fective date is list days after the da	date, if other than the ted, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with se	er or an authorized representative of a ection 608.408(3), Florida Statutes, the extitutes an affirmation under the penalties	member.
LE V: Effective of fective date is list days after the da	date, if other than the ted, the date must be ate of filing.) GNATURE: Signature of a member of this document const	er or an authorized representative of a section 608.408(3), Florida Statutes, the extitutes an affirmation under the penalties herein are true.)	member.
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