

**L100000109374**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : AGENTS AND CORPORATIONS, INC  
Account Number : I20010000112  
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Email Address: \_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.  
W.S. Enterprises LLC

*U.S. Enterprises  
USA, LLC*

Certificate of Status	0
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Corporate Filing Menu

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**A. LUNT**

OCT 20 2010

**EXAMINER**



October 11, 2010

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

AGENTS AND CORPORATIONS, INC.

SUBJECT: W.S. ENTERPRISES LLC  
REF: W10000047328

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce  
Regulatory Specialist II

FAX Aud. #: H10000221415  
Letter Number: 210A00023977

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P.O BOX 6327 -- Tallahassee, Florida 32314

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is: W.S. Enterprises USA, LLC.

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is: 179 Charles Hendry Rd., Perry, FL 32348.

**ARTICLE III - Registered Agent, Registered Office & Registered Agent Signature:**

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

Agents and Corporations, Inc.  
300 Fifth Avenue South, Suite 101-330  
Naples, FL 34102


SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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.

Agents and Corporations, Inc.

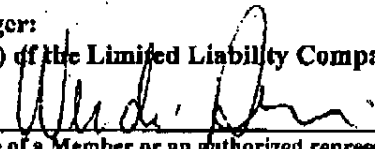
  
By: John L. Williams, Vice-President

**ARTICLE IV - Management (Check box if applicable.) ☐**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

**ARTICLE V - Manager:**

The initial Manager(s) of the Limited Liability Company shall be:  
Wendi Denison

  
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.)

  
Typed or printed name of signee