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## COVER LETTER

Division of Corporations
SUBJECT: WSC Services, LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
David J. Montgomery
Name of Person
Firm/Company
1714 69th Avenue West, B-205
Address
Bradenton, FL 34207
City/State and Zip Code
djmontgomery23@yahoo.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Teresa K. Bowman, Esq. at (941 Area Code) 365-2304  Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:  \$125.00 Filing Fee \$\times 130.00 Filing Fee & Certificate of Status \$\times 25.00 Filing Fee & Certificate of Status \$\times 25.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate 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 Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

WSC Services, L.L.C			
(Must	end with the words "Li	imited Liability Company, "L.L.C.," or "LLC.")	)
ARTICLE II - Address: The mailing address and str	eet address of the princ	ipal office of the Limited Liability Company is:	:
Principal Office Address:		Mailing Address:	
6607 11th Avenue East		1714 69th Avenue West, B-205	
Bradenton, FL 34208			
ARTICLE III - Registere		ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an	ı individual or
ARTICLE III - Registere	npany cannot serve as its h an active Florida regis	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate anstration.)	ALAE T
ARTICLE III - Registere (The Limited Liability Con another business entity wit The name and the Florida s	npany cannot serve as its h an active Florida regis	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate anstration.)	ALAE T
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ARTICLE III - Registere (The Limited Liability Con another business entity wit The name and the Florida s	npany cannot serve as it the an active Florida regis treet address of the regi esa K. Bowman, Esq.	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an stration.) stered agent are:	ALL ANIASSEE
ARTICLE III - Registere (The Limited Liability Con another business entity with The name and the Florida series    Teres   46 F	npany cannot serve as it the an active Florida regis treet address of the regi esa K. Bowman, Esq.	ffice, & Registered Agent's Signature: s own Registered Agent. You must designate an stration.) stered agent are: Name	ALL ANIASSEE

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..

Registered Agent's Signature (REQUIRED)

Page 1 of 2

(CONTINUED)

<u>Γitle:</u>	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Manager	
MGR	David J. Montgomery
	1714 69th Avenue West, B-205
	Bradenton, FL 34207
AMBR	Josephine M. Montgomery
<del></del>	1714 69th Avenue West, B-205
	Bradenton, FL 34207
<del></del>	
	<del></del>
EV: Effective date, if other than the dative date is listed, the date must be	ate of filing: 1-6-2014 . (OPTIONAL) specific and cannot be more than five business days prior to or 90 days
E V: Effective date, if other than the dective date is listed, the date must be f filing.)	
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ARTICLE IV-