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## **COVER LETTER**

Division of Corporations		
SUBJECT: WB Brothers Construction, LLC		
Name of Lir	nited Liability Company	
The enclosed Articles of Organization and fee(s) at Please return all correspondence concerning this m	-	
riease return an correspondence concerning uns m	latter to the following.	
Bismarck Campo		
	Name of Person	
WB Brothers Construction	Fi(C.	
	Firm/Company	
14959 Hawksmoor Run Cir		
	Address	
Orlando, FL 32828	City/State and Zip Code	
	thy/state and zip code	
wbconstructionllc@omail.com E-mail address: (to be use	d for future annual report notifica	tion)
For further information concerning this matter, plea	ase call:	
Biomarak Compo	E00 \ E761107	
Bismarck Campo at ( !  Name of Person	508 ) <u>5761127</u> Area Code Daytime Tel	ephone Number
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status	S155.00 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	Street/Courier Addr Registration Section	res <u>s</u>
Division of Corporations P.O. Box 6327	Division of Corporat Clifton Building	ions

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 24, 2015

BISMARCK CAMPO 14959 HAWKSMOOR RUN CIR ORLANDO, FL 32828

SUBJECT: WB CONSTRUCTION LLC

Ref. Number: W15000013231

We have received your document for WB CONSTRUCTION LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

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) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 915A00003839

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

WB Brothers construction, LLC		
(Must end with the words	"Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
14959 Hawksmoor Run Cir	Same	
Orlando, Fl 32828		
		<del></del>
another business entity with an active Florida	as its own Registered Agent. You must designate an i registration.)	78 <b>2015</b>
(The Limited Liability Company cannot serve	as its own Registered Agent. You must designate an i registration.)	TALL MARKET
(The Limited Liability Company cannot serve a another business entity with an active Florida	as its own Registered Agent. You must designate an i registration.) registered agent are:	TALL MARKET
(The Limited Liability Company cannot serve a another business entity with an active Florida in The name and the Florida street address of the	as its own Registered Agent. You must designate an i registration.)	FILE  8015 NAR -6  SLOVETANIA SSEE
(The Limited Liability Company cannot serve a another business entity with an active Florida in The name and the Florida street address of the	as its own Registered Agent. You must designate an i registration.) registered agent are:  Name	TALL MARKET
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(The Limited Liability Company cannot serve a another business entity with an active Florida.)  The name and the Florida street address of the  Bismarck Campo  14959 Hawksmoor F	as its own Registered Agent. You must designate an iregistration.) registered agent are:  Name  Run Cir	FILED 2015 MAR -6 PM SABBARSASSIN

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Abdelouahed Oumedlouz  14959 Hawksmoor Run Cir Orlando. FL 32828  (Use attachment if necessary)  ICLE V: Effective date, if other than the date of filing:  1 effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after ate of filing.)  ICLE VI: Other provisions, if any.  REOUIRED SIGNATURE:    Signature of s member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)  Abdelouahed Oumedlouz  Typed or printed name of signee  Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	<u>Title:</u> "AMBR" = Authorized M "MGR" = Manager—	Name and Address: Member	
(Use attachment if necessary)  ICLE V: Effective date, if other than the date of filing:	MOK - Manager	Abdelouahed Oumedlouz	
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\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	effective date is listed, the date of filing.)  CLE VI: Other provisions, if  REQUIRED SIGNATURES  Signature  (In accordance constitutes an a I am aware that constitutes a thing with the constitutes and the constitutes and the constitutes a signature in the constitute in the	any.  IRE:  Inature of a member or an authorized representative of a member.  with section 605.0203 (1) (b), Florida Statutes, the execution of this document affirmation under the penalties of perjury that the facts stated herein are true. It any false information submitted in a document to the Department of State irid degree felony as provided for in s.817.155, F.S.)  bdelouahed Oumedlouz  Typed or printed name of signee  Filting Fees:	2015 MAR -6 PM

ARTICLE IV-