

U5000087964

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(Address)

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2015 MAY 18 P 1:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

5/19/15  
TSCHWEDER

**GPG** | **Guest • Peavy • Guest**

Certified Public Accountants, P.A.

50 Kindred Street, Suite 303, Stuart, FL 34994

T: (772) 286-9005 1(800) 314-1019 F: (772) 286-5030

May 11, 2015

Registration Section  
Division of Corporations  
P.O. BOX 6327  
Tallahassee, FL 32314

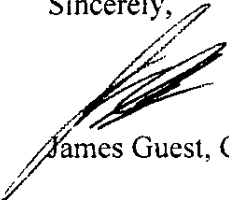
RE: Articles of Organization and Registered Agent Designation  
**WSSB, LLC**

Dear Sir/Madam:

In reference to the party mentioned above, please find enclosed the original and one copy of the Articles of Organization to be filed with the Secretary of State, State of Florida. Also enclosed is my check in the amount of \$155.00, which represents \$125.00 for the filing fee and \$30.00 for the Certified Copy. Please return the certified copy of the Articles of Organization and designation of Registered Agent.

If you have any questions, please feel free to contact me.

Sincerely,



James Guest, CPA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** WSSB, 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:

JAMES GUEST

Name of Person

GUEST PEAVY GUEST, CPAs, P.A.

Firm/Company

50 SE KINDRED ST., SU. 303

Address

STUART, FL 34994

City/State and Zip Code

JGUEST@GPCPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

<u>JAMES GUEST</u>	at ( <u>772</u> )	<u>286-9005</u>
Name of Person	Area Code	Daytime Telephone Number

Enclosed is a check for 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 Address**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WSSB, 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 principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

2788 COLD SPRING DR.  
JENSEN BEACH, FL 34957

2788 COLD SPRING DR.  
JENSEN BEACH, FL 34957

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JAMES GUEST

Name

50 SE KINDRED ST., SUITE 303

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

STUART

FL

34994

City

State

Zip

*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)

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**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

WALTER H. WAGNER, JR.

2788 COLD SPRING DR.

JENSEN BEACH, FL 34957

MGR

SHANTAL M. WAGNER

2788 COLD SPRING DR.

JENSEN BEACH, FL 34957

(Use attachment if necessary)

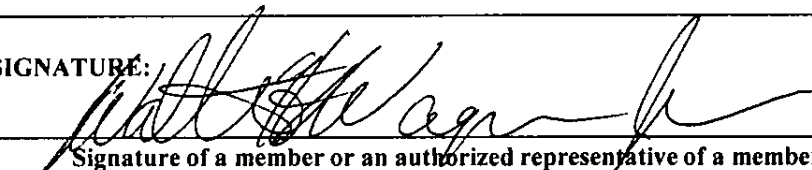
**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**



Signature of a 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.)

Walter H. Wagner Jr.

Typed or printed name of signee

**Filing Fees:**

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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