

L16000092998

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

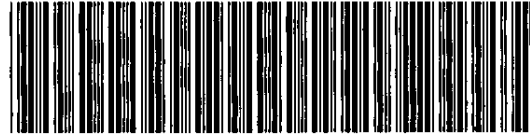
(Document Number)

Certified Copies _____ Certificates of Status _____

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MAY 17 PM 3:56

W16-034971

05/17/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 12, 2016

ADRIENNE WINBUSH
176 LAKEBREEZE CIR.
LAKE MARY, FL 32746

SUBJECT: WBR ENTERPRISES, LLC
Ref. Number: W16000034971

We have received your document for WBR ENTERPRISES, 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):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of 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) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 816A00010029

WBR ENTERPRISES, LLC
176 LAKEBREEZE CIRCLE
LAKE MARY, FL 32746

April 29, 2016

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Sirs:

RE: WBR ENTERPRISES, LLC

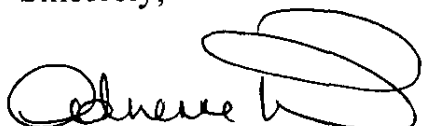
Enclosed are one original and one copy of my Articles of Organization for the above proposed Limited Liability Company.

Also enclosed is a check in the amount of

Filing Fee \$125.00

Total \$125.00

Sincerely,


Adrienne Winbush

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WBR Enterprises L.L.C.

(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:

1716 Lakebreeze Circle
Lake Mary, FL 32746

Mailing Address:

1716 Lakebreeze Circle
Lake Mary, FL 32746

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:

Adrienne Winbach

Name

1716 Lakebreeze Circle

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

Lake Mary FL 32746

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.

Adrienne Winbach

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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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

AMBR

Name and Address:

Adrienne Winbush

1716 Lakebreeze Circle
Lake Mary, FL 32746

MGR

Adrienne Winbush

1716 Lakebreeze Circle
Lake Mary, FL 32746

MGR

Jordan Winbush

1716 Lakebreeze Circle
Lake Mary, FL 32746

(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:

Adrienne Winbush

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

Adrienne Winbush

Typed or printed name of signer

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)