L16000099474

(Requestor's Name)	_
(Address)	
(Address)	
(City/State/Zip/Phone #)	-
PICK-UP WAIT MAIL	
(Business Entity Name)	-
(Document Number)	-
Certified Copies Certificates of Status	-
Special Instructions to Filing Officer:]

Office Use Only



100249244651

FILED May 24, 2016 08:00 AM Secretary of State



COVER LETTER

	TO VENEZ A AREA
TO:	Registration Section Division of Corporations
SUBJI	WCFC Construction LLC
	Name of Limited Liability Company
The en	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Anthony Bishop
	Name of Person
	WCFC Construction LLC
	Firm/Company
	4409 Hoffner Avenue
	Address
	Orlando, Florida 32872
	City/State and Zip Code WCFC@gmail.com
	B-unil address: (to be used for future annual report notification)
For furt	ner information concerning this matter, please call:
	Anthony Bishop 407 721-8692
	Name of Person Area Code Daytime Telephone Number
Enclos	ed is a check for the following amount:
]\$125.6	Certificate of Status Certificate of Status Cadditional copy is enclosed) \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certificate & Certificate & Cert
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address New Filing Section Division of Corporations Clifton Building 2561 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:			FILED May 24, 2016 08:00 AM			
WCFC Construction			Secretary of State			
(Must end	with the words "Limited	i Liability Company,	"LLC.," or "LLC	.")	, ,	
ARTICLE II - Address: The mailing address and street as	idross of the principal o	office of the Limited I	iability Company	is;		
Frincip	el Office Address:	·=	Mailing	Address:		
4409 Hoffner Avenue	S	same			,	
Orlando, Florida 328	72			tingen accent to	ribin paternan in	
					∮ ा । विक्रम्	
The name and the Florida street	Anthony Bishop	l agent are:		and the second 	• - · · ·	
	4409 Hoffner Avenu			<u> </u>	i 4	
	Florida street addres	s (P.O. Box <u>NOT</u> acc	eptable)			
	Orlando	Florida	32872		i ,	
	City	State	Zìp			
Having been named as registered a place designated in this certificate, further agree to comply with the pram familiar with and accept the ob-	I hereby accept the approvisions of all statutes r	ointment as registered clating to the proper o	agent and agree to nd complete perfor provided for in Ch	o act in this capacity. I mance of my duties, and I	į.	

Page 1 of 2

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager	AnthonyDickon	
MGR	AnthonyBishop 4409 Hoffner Ave	new I as
	Orlando, Florida	
	Oliando, Farius	_
MGR	Linda Bishop	
	4409 Hoffner Ave	t
	Orlando, Florida	,
MCB	Clarker Marker	
MGR	Carlos Muina	•
	4409 Hoffner Ave Orlando, Fla	
	Orianoe, Fia	:
,		•
,		
EV: Effective date, if other than the date ective date is listed, the date must be sp of filing.)	of filing:, (OPTIONAL) ecific and cannot be more than five business days prior to or 90 de	•
ective date is listed, the date must be sp of filing.)	ecific and cannot be more than five business days prior to or 90 de meet the applicable statutory filing requirements, this date will not be	•
EV: Effective date, if other than the date extive date is listed, the date must be sp of filing.) the date inserted in this block does not a ment's effective date on the Department	ecific and cannot be more than five business days prior to or 90 de meet the applicable statutory filing requirements, this date will not be	•
E V: Effective date, if other than the date extive date is listed, the date must be sp if filing.) the date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any.	ecific and cannot be more than five business days prior to or 90 demeet the applicable statutory filing requirements, this date will not be of State's records.	•
E V: Effective date, if other than the date extive date is listed, the date must be sp if filing.) the date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any.	need the applicable statutory filing requirements, this date will not be of State's records.	•
E V: Effective date, if other than the date extive date is listed, the date must be sp of filing.) the date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a man This document is executed and aware that any fals	need the applicable statutory filing requirements, this date will not be of State's records.	•
E V: Effective date, if other than the date extive date is listed, the date must be sp of filing.) the date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a man This document is executed and aware that any fals	meet the applicable statutory filing requirements, this date will not be of State's records. comber or an authorized representative of a member. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes.	•
E V: Effective date, if other than the date extive date is listed, the date must be sp filing.) the date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a many that any fals constitutes a third degree.	meet the applicable statutory filing requirements, this date will not be of State's records. comber or an authorized representative of a member. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes.	•
E V: Effective date, if other than the date extive date is listed, the date must be sp filing.) the date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a many that any fals constitutes a third degree.	meet the applicable statutory filing requirements, this date will not be of State's records. comber or an authorized representative of a member. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes. Ited in accordance with section 605.0203 (1) (b), Florida Statutes.	•

Page 2 of 2