

L17000048221

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

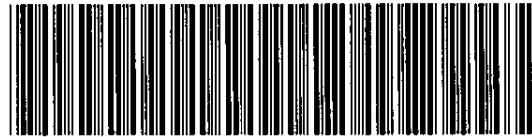
(Business Entity Name)

(Document Number)

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17 MAR -3 PM 4:38

C. GOLDEN
MAR - 6 2017

FILED
2017 MAR -3 PM 2:46
TALLAHASSEE, FL 32301

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.INCserv.com
e-mail: info@incserv.com



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ORDER FORM

TO: Florida Department of State
Division of Corporations, Clifton
Building
2661 Executive Center Circle
Tallahassee, FL 32301
corphelp@dos.myflorida.com
850-245-6051

FROM: Melissa Stops
mstops@incserv.com
850.656.7953

REQUEST DATE: 3/3/2017

PRIORITY: Routine

OUR REF. # (Order ID#): 562481

ORDER ENTITY:
WP VERO LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

WP VERO LLC (FL)

New LLC filing

Please provide a certified copy as evidence.

NOTES:

RETURN/FORWARDING INSTRUCTIONS:

If you should have any questions, please contact me at 656-7956.

Best regards,

Client Services Representative

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2017 MAR -3 PM 2:46
TALLAHASSEE, FL
STATE OF FLORIDA
CLERK OF THE CIRCUIT COURT

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name:

The name of the Limited Liability Company is:

2017 MAR -3 PM 2:46

WP VERO LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

SEC
TAL

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

9340 SW 77th Street

Miami, FL 33173

9340 SW 77th Street

Miami, FL 33173

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:

Walter Prio

Name

9340 SW 77th Street

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

Miami

Florida

33173

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..

Walter Prio

By:

Walter Prio

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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 Prio

9340 SW 77th Street

Miami, FL 33173

(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.

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.

Walter Prio

Walter Prio

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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FLORIDA