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(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Do	cument Number))			
Certified Copies	_ Certificate:	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

	New Filing Section Division of Corporations	
SUBJEC	CT: WRXparts, LLC	
	Name of Limite	d Liability Company
The enclo	osed Articles of Organization and fee(s) are si	abmitted for filling.
Please ret	eturn all correspondence concerning this matte	r to the following:
	John Cardona	
		Name of Person
	WRXparts, LLC	
		Firm/Company
	6971 Park Street	
		Address
	Hollywood, Florida 33024	
		State and Zip Code
	jcardona51387@gmail.com	1
	E-mail address: (to be used to	future annual report notification)
For further	r information concerning this matter, please ca	AI:
	John Cardona at (954	, 709-2870
	Name of Person Area	Code Daytime Telephone Number
Enclosed	I is a check for the following amount:	
\$125.00 [Filing Fee X \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy additional copy is enclosed) S160.00 Filing Fee, Certified Copy (additional copy is enclosed)
	Mailing Address	Street Address
	New Filing Section	New Filing Section Division of Corporations
	Division of Corporations P.O. Box 6327	Division of Corporations Clitton Building
	Tallahassee, Fl. 32314	2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

WRXparts,	LLC			
(Must contain	in the words "Limited Liab	ility Con	pany, "L.IC" or "LLC.")	
ARTICLE II - Address: The mailing address and street add	dress of the principal office	of the L	imited Liability Company is:	
<u>Principa</u>	Principal Office Address:		Mailing Address:	
6971 Park Street, Hollywood, FL 33024		4	6971 Park Street, Hollywood, FL 3302	
ARTICLE III - Registered Ager (The Limited Liability Company o	nt, Registered Office, & R	- - egistered		
ARTICLE III - Registered Ager The Limited Liability Company of another business entity with an ac	nt, Registered Office, & Reannot serve as its own Regetive Florida registration.)	egistered istered A	I Agent's Signature:	
ARTICLE III - Registered Ager The Limited Liability Company of another business entity with an ac	nt, Registered Office, & Reannot serve as its own Regetive Florida registration.)	egistered istered A	I Agent's Signature:	
ARTICLE III - Registered Ager The Limited Liability Company of another business entity with an ac	nt, Registered Office, & Regannot serve as its own Regetive Florida registration.) ddress of the registered age Alycia P. Oppenhei	egistered istered A	I Agent's Signature:	
ARTICLE III - Registered Ager	nt, Registered Office, & Regannot serve as its own Regetive Florida registration.) ddress of the registered age Alycia P. Oppenhei	egistered A	I Agent's Signature:	
ARTICLE III - Registered Ager The Limited Liability Company of another business entity with an ac	nt, Registered Office, & Regannot serve as its own Regetive Florida registration.) ddress of the registered age Alycia_P_Oppenhei	egistered A and are: im ume	l Agent's Signature: gent. You must designate an individual or	
ARTICLE III - Registered Ager The Limited Liability Company of another business entity with an ac	nt, Registered Office, & Regannot serve as its own Regetive Florida registration.) ddress of the registered age Alycia P. Oppenher Na	egistered A and are: im ume	l Agent's Signature: gent. You must designate an individual or	

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)

CRETARY OF STATE

<u>Title:</u> "AMBR" = At	ithorized Member	Name and Address:	
"MGR" = Mar MGR	nager 	John Cardona 6971 Park Street Hollywood, FL 33024	
			17
		A- 	APPE 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	nt if necessary)		ED # 9: 08 하 화하
If an effective date is li he date of filing.) Note: If the date insert	sted, the date must be specific	ling:	-
ARTICLE VI: Other pro	·		
REOUIREDS	SIGNATURE:	~ /	
	Signature of a membe This document is executed ir I am aware that any false info	r or an authorized representative of a member, in accordance with section 605.0203 (1) (b), Florida Statu ormation submitted in a document to the Department of Sony as provided for in s.817.155, F.S.	rtes. tate
		Cardona ped 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)

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

ARTICLE IV-