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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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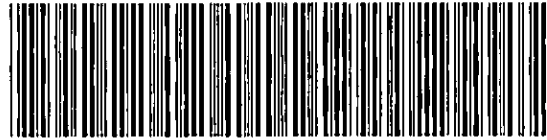
(Business Entity Name)

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TALLAHASSEE, FLORIDA

T SCHROEDER

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

US HOMES SC WCT, LLC

- Art of Inc. File \_\_\_\_\_
- LTD Partnership File \_\_\_\_\_
- Foreign Corp. File \_\_\_\_\_
- L.C. File \_\_\_\_\_
- Fictitious Name File \_\_\_\_\_
- Trade/Service Mark \_\_\_\_\_
- Merger File \_\_\_\_\_
- Art. of Amend. File \_\_\_\_\_
- RA Resignation \_\_\_\_\_
- Dissolution / Withdrawal \_\_\_\_\_
- Annual Report / Reinstatement \_\_\_\_\_
- Cert. Copy \_\_\_\_\_
- Photo Copy \_\_\_\_\_
- Certificate of Good Standing \_\_\_\_\_
- Certificate of Status \_\_\_\_\_
- Certificate of Fictitious Name \_\_\_\_\_
- Corp Record Search \_\_\_\_\_
- Officer Search \_\_\_\_\_
- Fictitious Search \_\_\_\_\_
- Fictitious Owner Search \_\_\_\_\_
- Vehicle Search \_\_\_\_\_
- Driving Record \_\_\_\_\_
- UCC 1 or 3 File \_\_\_\_\_
- UCC 11 Search \_\_\_\_\_
- UCC 11 Retrieval \_\_\_\_\_
- Courier \_\_\_\_\_

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**Articles of Organization  
of  
US Homes SC WCT, LLC**

The undersigned, desiring to form a limited liability company under and pursuant to Florida Statute Section 605.0201 (2018) entitled "Revised Limited Liability Company Act" does hereby adopt the following Articles of Organization for such company:

ARTICLE I - NAME AND EFFECTIVE DATE

The name of the limited liability company is US Homes SC WCT, LLC and the effective date of its existence is January 18, 2019.

ARTICLE II - PURPOSE, DURATION AND CONTINUED EXISTENCE

The LLC is created for the purpose of owning and managing commercial real estate for long term rental and appreciation. The LLC's duration shall be perpetual, unless terminated by the unanimous written agreement of all members or by the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or upon the occurrence of any other event which terminates the continued membership of a member; unless the business of the LLC is continued by the consent of all the remaining members, or by amendment of these Articles of Organization providing for the continued existence of the LLC subsequent to the foregoing events.

ARTICLE III - ADDRESS

The initial mailing and street address of the principal office of the LLC is 706 Golfpark Drive, Celebration, FL 34747.

ARTICLE IV - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this LLC is 706 Golfpark Drive, Celebration, FL 34747; and the name of the initial registered agent of this

LLC at that address is Wiverson Carlos Trecenti.

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 application, I hereby certify that I am familiar with and accept the responsibility, obligations and appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties as registered agent.

*Wiverson C. Trecenti*  
Wiverson Carlos Trecenti

ARTICLE V - MEMBERS OF THE LLC

The members of the LLC are:

Wiverson Carlos Trecenti                    50%  
706 Golfpark Drive  
Celebration, FL 34747

Clarissa Castiglione Trecenti            50%  
706 Golfpark Drive  
Celebration, FL 34747

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ARTICLE VI - MANAGEMENT OF COMPANY

The LLC is to be a manager-managed company. The name and address of the Managers are:

Wiverson Carlos Trecenti, AMBR  
706 Golfpark Drive  
Celebration, FL 34747

Clarissa Castiglione Trecenti, MBR  
706 Golfpark Drive  
Celebration, FL 34747


IN WITNESS WHEREOF, the undersigned Auth. Rep. has hereunto set his hand and seal this 18th day of January 2019.

Wiverson C. Trecenti  
Wiverson Carlos Trecenti, Auth. Rep.

STATE OF FLORIDA  
COUNTY OF OSCEOLA

The foregoing instrument was acknowledged before me this 18th day of January 2019 by **Wiverson Carlos Trecenti**, who is  personally known to me *or*  who produced his State of Florida's Driver's License No. \_\_\_\_\_, as identification and who did not take an oath.

Mel Pearlman  
Notary Public  
My Commission Expires:

 MELVIN PEARLMAN  
Commission # GG 245618  
Expires September 12, 2022  
Elected Thru Budget Notary Services

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