

L1900174147

(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:

3570

Office Use Only



000330894750

06/25/19--21020--000 \*\*125.00

FILED

2019 JUN 25 AM 9:18

SECRETARY OF STATE  
TALLAHASSEE, FL

N CULLIG

JUL 01 2019



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 8, 2019

AMBER O'CONNOR  
3755 WEST LAKE HAMILTON DRIVE  
WINTER HAVEN, FL 33881

SUBJECT: WAYMAT FLORIDA PROPERTIES, LLC  
Ref. Number: W19000062409

We have received your document for WAYMAT FLORIDA PROPERTIES, 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):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The proper form is enclosed for your convenience.

Please return 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.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 519A00013676

FILED

2019 JUN 25 AM 9:18

SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLES OF ORGANIZATION**  
**FOR**  
**FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I**  
**Name**

The name of this Limited Liability Company is:

WAYMAT FLORIDA PROPERTIES, LLC

**ARTICLE II**  
**Address**

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

3755 West Lake Hamilton Drive, Winter Haven, Florida 33881

**ARTICLE III**  
**Management**

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

**ARTICLE IV**  
**Initial Board of Managers**

This Limited Liability Company shall have two (2) managers initially. The number of managers may be either increased or decreased from time to time in accordance with the Operating Regulations of this Limited Liability Company, but shall never be less than one.

The name and address of the initial managers of this Limited Liability Company is as follows:

<u>Name</u>	<u>Street Address</u>
Wayne Giddings	3755 West Lake Hamilton Drive, Winter Haven, Florida 33881
Matthew Giddings	3755 West Lake Hamilton Drive, Winter Haven, Florida 33881

## ARTICLE V

### Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

Amber O'Connor  
3755 West Lake Hamilton Drive  
Winter Haven, Florida 33881

*Having been appointed as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, I hereby accept this appointment as registered agent and agree 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

  
\_\_\_\_\_  
AUTHORIZED REPRESENTATIVE'S SIGNATURE

SECRETARY OF STATE  
TALLAHASSEE, FL

2019 JUN 25 AM 9:18

FILED

(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.).

WAYNE GIDDINGS, AUTHORIZED REPRESENTATIVE  
Type or printed name of signee