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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE J: 050361 AUTHORIZATION COST LIMIT : \$ 125.00 ORDER DATE: November 13, 2019 ORDER TIME : 12:30 PM ORDER NO. : 050361-015 CUSTOMER NO: 8287610 DOMESTIC FILING NAME: WFCW PROPCO NAPLES LLC EFFECTIVE DATE: ___ ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP __ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Kadesha Roberson - EXT.

EXAMINER'S INITIALS:

COVER LETTER

TO:	New Filing Section Division of Corporations			
SUBJE	WFCW Propco Naples LLC			
SUBJE	Name of Limited Liability Company			
The enc	losed Articles of Organization and fee(s) are submitted	for filing.	
Please re	eturn all correspondence concerning th	is matter to the	following:	
	Miguel Heras			
		Name of	f Person	
	Clean Streak Ventures LLC			
Firm/Company				
	980 North Federal Highway, Su			
		Address		
	Boca Raton, Florida 33432			
	z.cedeno@invbahia.com	City/State ar	d Zip Code	
		used for future a	annual report notification)	
For further	r information concerning this matter, p	lease call:		
	Mike Kazma	561 t (9534164	
	Name of Person	,	Daytime Telephone Number	
Enclosed	l is a check for the following amount:			
	Filing Fee \$130.00 Filing Fee Certificate of Status	s UCertifi	200 Filing Fee & \$160.00 Filing Fee, led Copy al copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	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 2661 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:		
WFCW Propco Naples LLC		
(Must contain the words "Limit	ed Liability Compa	any, "L.L.C.," or "L.L.C.")
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Lim	nited Liability Company is:
Principal Office Address:		Mailing Address:
980 North Federal Highway, Suite 315	ç	980 North Federal Highway, Suite 315
Boca Raton, Florida 33432	F	Boca Raton, Florida 33432
Corporation Ser	Name et	
Florida street add	ress (P.O. Box <u>NO</u>	II acceptable)
Tallahassee	FL	32301
City	State	Zip
<u>By</u>	ppointment as regists relating to the proof on as registered ago ervice Company	stered agent and tigree to act in this capacity. I oper and complete performance of my duties, and I
	(CONTINUE	ED)

SECTION 14 PRIZE OF

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
MGR	Andres Bethencourt		
	980 North Federal Highway, Suite 315		
	Boca Raton, Florida 33432		
MGR	Christopher Woodburn 980 North Federal Highway, Suite 315		
	Boca Raton, Florida 33432		
			
(Use attachment if necessary)			
the date of filing.)	cannot be more than five business days prior to or 90 days after oplicable statutory filing requirements, this date will not be listed as		
ARTICLE VI: Other provisions, if any.			
REQUIRED SIGNATURE:	roet		
This document is executed in acco	ordance with section 605.0203 (1) (b), Florida Statutes, on submitted in a document to the Department of State provided for in s.817.155, F.S.		
Andres Bethencourt			

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)