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| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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313 C TATAS (3633) H

КОУ (5 2019 Д. Билиновау CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

| ACCOUNT NO. : 12000000195 |
|---|
| REFERENCE: 050361 8287610 |
| AUTHORIZATION : Forell Black |
| COST LIMIT : (\$\125.00 |
| ORDER DATE: November 13, 2019 |
| ORDER TIME : 12:37 PM |
| ORDER NO. : 050361-030 |
| CUSTOMER NO: 8287610 |
| ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ |
| DOMESTIC FILING |
| NAME: WFCW PROPCO BONITA 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

| | New Filing Section Division of Corporations | | |
|---------------|---|-------------------|--|
| SUBJEC | WFCW Propco Bonita LLC | | |
| SUBJEC | | of Limited Liab | ility Company |
| The enclo | sed Articles of Organization and fee | c(s) are submitte | ed for filing. |
| Please reti | urn all correspondence concerning t | his matter to the | e following: |
| | Miguel Heras | | |
| | | Name o | of Person |
| | Clean Streak Ventures LLC | | |
| | | Firm/C | Сотралу |
| | 980 North Federal Highway, S | uite 315 | |
| | | Add | iress |
| | Boca Raton, Florida 33432 | | |
| | z.cedeno@invbahia.com | City/State a | nd Zip Code |
| | E-mail address: (to be | used for future | annual report notification) |
| For further i | nformation concerning this matter, | please call: | |
| | Mike Kazma | 561 at (| 9534164 |
| | Name of Person | | Daytime Telephone Number |
| Enclosed is | s a check for the following amount: | | |
| \$125.00 Fi | iling Fee \$130.00 Filing Fee Certificate of Statu | ıs L—Certi: | on Filing Fee & S160.00 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

| WFCW Propos Bo | | | | |
|--|--|--|--|--|
| (Must cor | tain the words "Limited | Liability Company, | , "L.L.C.," or "LLC.") | |
| ARTICLE II - Address: The mailing address and street | address of the principal c | office of the Limited | Liability Company is: | |
| <u>Princi</u> | pal Office Address: | | Mailing Address | p. |
| 980 North Federal High | way, Suite 315 | 980 | North Federal Highway, Suite 315 | <u>. </u> |
| Boca Raton, Florida 33 | 432 | Boca | Raton, Florida 33432 | |
| | Corporation Service 1201 Hays Street Florida street addres | Name | | |
| | Tallahassee | FL | 32301 | |
| | City | State | Zip | |
| Having been named as registered place designated in this certificate further agree to comply with the pam familiar with and accept the o | r, I hereby accept the app provisions of all statutes re bligations of my position Corporation Serv By | ointment as register elating to the proper as registered agent | ed agent and agree to act in to rand complete performance of as provided for in Chapter 60 | his capacity. I of my duties, and I |

| Title: | Name and Address: |
|--|--|
| "AMBR" = Authorized Member | |
| "MGR" = Manager MGR | Andres Bethencourt |
| WOIL | 980 North Federal Highway, Suite 315 |
| | Boca Raton, Florida 33432 |
| 400 | |
| MGR | Christopher Woodbum |
| | 980 North Federal Highway, Suite 315 |
| | Boca Raton, Florida 33432 |
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| (Use attachment if necessary) | |
| (Use attachment if necessary) | |
| • | of filing: (OPTIONAL) |
| CLE V: Effective date, if other than the date effective date is listed, the date must be spe | of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days a |
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as

Typed or printed name of signee

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

Andres Bethencourt

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)