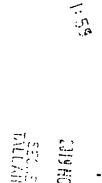
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32303 Phone: 850-558-1500

Phone: 850-558-1500					
ACCOUNT NO. : 12000000195					
REFERENCE: 050361 8287610					
AUTHORIZATION : Sometic Ble 130					
COST LIMIT : \$ 125.00					
ORDER DATE : November 13, 2019					
ORDER TIME : 12:33 PM					
ORDER NO. : 050361-020					
CUSTOMER NO: 8287610					
DOMESTIC FILING					
NAME: WFCW OPCO LLC					
EFFECTIVE DATE:					
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX 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 Opco LLC					
SUBJEC	T:Nar	ne of Limited Lia	bility Company			
The enclo	osed Articles of Organization and	fee(s) are submitt	ed for filing.			
Please ret	turn all correspondence concernin	g this matter to th	e following:			
	Miguel Heras					
		Name of Person				
	Clean Streak Ventures LLC Firm/Company					
	980 North Federal Highway, Suite 315					
		Address				
	Boca Raton, Florida 33432					
	z.cedeno@invbahia.com	City/State	and Zip Code			
	E-mail address: (to	be used for future	e annual report notification)			
For further	information concerning this matte	er, please call:				
	Mike Kazma	561 at (9534164)			
	Name of Person		Daytime Telephone Number			
Enclosed i	is a check for the following amou	nt:				
\$125.00 F	Filing Fee S130.00 Filing F Certificate of St	atus LCerti	5.00 Filing Fee & S160.00 Filing Fee, Gertificate 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

VIII CIIII A	in the words "Limited	Liability Company	"L.L.C.," or "LLC.")	
· (.**ttsi voihai	n the words Elimited	Elabinty Company,	Lib.C., of BEC.)	
ARTICLE II - Address:		- m mst - 1 i - i - i	11.122. 0	
The mailing address and street add	iress of the principal of	office of the Limited	Liability Company is:	
<u>Principal</u>	Office Address:		Mailing Addres	<u>s</u> :
980 North Federal Highwa	y, Suite 315	980 1	980 North Federal Highway, Suite 315	
Boca Raton, Florida 33432			Raton, Florida 33432	
The name and the Florida street ad	Idress of the registere	_		
	1201 Hays Street			
	Florida street addres	ss (P.O. Box <u>NOT</u> a	cceptable)	
	Tallahassee	FL	32301	
	City	State	Zip	
Having been named as registered ag place designated in this certificate, I further agree to comply with the prov am familiar with and accept the oblig	hereby accept the app visions of all statutes r gations of my position Corporation Serv By	pointment as registero elating to the proper as registered agent o	ed agant and agree to act in and complete performance as provided for in Chapter 60	this capacity. I

TALLAROS IN FILE: 20

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" ≃						
MGR		Andres Bethencourt				
		980 North Federal Highway, Suite 315				
		Boca Raton, Florida 33432				
MGR		Christopher Woodburn				
<u></u>		980 North Federal Highway, Suite 315 Boca Raton, Florida 33432				
						
(Hen attacl	hment if necessary)					
(CSC ditac)	mienen necessary)					
(If an effective date the date of filing.) <u>Note:</u> If the date in	is listed, the date must be specific	ng: (OPTIONAL) and cannot be more than five business days prior to or 90 days after ne applicable statutory filing requirements, this date will not be listed as te's records.				
ARTICLE VI: Othe	er provisions, if any.					
REOUIRI	This document is executed in I am aware that any false infor	or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes. mation submitted in a document to the Department of State by as 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)