## Division of Corporations Electronic Filing Cover Sheet

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(((H20000396277 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : SICONT ENTERPRISES OF AMERICA INC

Account Number : I20160000041

: (407)443-8973

Fax Number

: (407)930-2626

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Ema <b>i</b> l	Address:	
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### FLORIDA LIMITED LIABILITY CO. WT INVESTMENT PROPERTY GROUP FL LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

**New Filing Section** 

TO:

H 20000 3962773

### COVER LETTER

Div	vision of Co	rporations				
SUBJECT:	WT INVI	ESTMENT PROP	ERTY G	ROUP FL	1.).C	
	-	N:	ame of Li	mited Liab	ility Company	2020 NOV
The encloses	d Articles o	f Organization an	d fec(s) a	re submitte	d for filing.	(0 Y 1 7
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≣\$125.00 F	iling Fee	⊒\$130,00 Filin Centificate of \$	ig Fee & itatus	Cenin	5.00 Filing Fee & icd Copy al copy is enclosed)	☐S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Division P.O. B	g Address ding Section on of Corporations ox 6327 assect F1, 32314	<b>;</b>		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Street Tallahassee, FL 3230	issee et. Suite 810

H200003962773

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

## WT INVESTMENT PROPERTY GROUP FLALC

(Must contain the words "Limited Liability Company, "L.J., C.," or "L.J., C.,")

#### ARTICLE II - Address:

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

rinegal Office Address:	Mailing Address:
13574 Village Park Dr Ste 250	
Orlando Fl 32837	

ARTICLE III - Registered Agent, Registered Office. & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

ORLANDO REGIS	<u>PERED AGENTS L</u>	LC
	Name	
13574 Village Park l	Dr. Ste. 250	
Florida street addres	is (P.O. Box <u>NOT</u> ac	rceptuble)
Orlando	<u> 171 </u>	32837
City	State	Zip

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 certificate. I hereby accept the appointment as registered agent and agree to 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 (REQUIRED)

(CONTINUED)

# H200003962773

	Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
	<u>MGR</u>	WANER TAVERAS 13574 VILLAGE PARK DR STE 250 ORLANDO EL 32837
ARTICL	(Use attachment if necessary) E.V: Effective date, if other than the da	te of filing:
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S 30.00 Certified Copy (Optional) S 5.00 Certificate of Status (Optional)