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## ARTICLES OF ORGANIZATION WWRAACA MANAGEMENT, LLC

The undersigned hereby forms a limited liability company under the laws of the State of Florida, Florida Statutes, Chapter 605 as follows:

#### ARTICLE 1 NAME

The name of this limited liability company shall be: **WWRAACA MANAGEMENT**, **LLC**.

# ARTICLE II PRINCIPAL OFFICE AND MAILING ADDRESS

The mailing address and the street address of the principal office of the limited liability company is: 4 ELEVENTH AVENUE, SUITE ONE, SHALIMAR, FLORIDA 32579.

## ARTICLE III INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the limited liability company's registered office is

DANIEL C. PERRI 4 Eleventh Avenue, Suite One Shalimar, Florida 32579.

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.

DANIEL C. PERRI Registered Agent

**AUTHORIZED REPRESENTATIVE:** 

Daniel C. Perri

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 \$817.155, F.S.

STATE OF FLORIDA COUNTY OF OKALOOSA

Sworn to and subscribed before me this 23 day of March, 2022, by Daniel C. Perri, who has produced \_\_\_\_\_\_ as identification, or who is personally known to me.

WITNESS my hand and official seal in the State and County last aforesaid this day of March, 2022.

BETSY L(SYKORA)

Notary Public

My commission expires: 10/04/2025

BETSY L. SYKORA
Notary Public-State of Florida
Commission # HH 181287
My Commission Expires
October 04, 2025

# ARTICLES OF ORGANIZATION WWRAACA MANAGEMENT, LLC

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#### ARTICLE I NAME

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DANIEL C. PERRI 4 Eleventh Avenue, Suite One Shalimar, Florida 32579.

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DANIEL C. PERRI Registered Agent

2: 55

IN WITNESS WHEREOF, the undersigned, being the authorized representative for the members, has hereunto set his hand and seal on this, the day of the company to do business both within and without the State of Florida and does make and file in the Office of the Secretary of State of Florida these Articles of Organization and affirms under penalties of perjury that the facts stated herein are true.

AUTHORIZED REPRESENTATIVE:

Daniel C. Perri

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felow as provided for in \$817.155, F.S.

STATE OF FLORIDA COUNTY OF OKALOOSA

Sworn to and subscribed before me this 23<sup>rd</sup> day of March, 2022 by Daniel C. Perri, who has produced \_\_\_\_\_\_ as identification, or who is personally known to me.

WITNESS my hand and official seal in the State and County last aforesaid this day of \_\_\_\_\_\_\_, 2022.

BETSY(L.SYKO)

Notary Public

My commission expires: 10/04/2025

