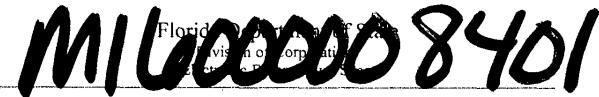
Division of Corporations



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023

Phone : (850)205-8842 Fax Number : (850)878-5368

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

Email Address:

Foreign Limited Liability Company WAWO LLC

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October 19, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: WAWO LLC REF: W16000071151

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Address in line 5 and 8 are inconsistant. One says 10380 SW Village Center Dr and the other says 1038 SW Village Center Dr. Please review and list the correct address.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II FAX Aud. #: B16000257868 AS ES Letter Number: 116A00022456 AS ES TORRESTER A T

COVER LETTER

(10) 10 (***-	WaWo LLC					
Name of Limited Liability Company						
		reign Limited Liability Comp od to register the above refer				
ease return	all correspondence	concerning this matter to the	following:			
	Gia Azron					
		N	ame of Person	···		
	WaWo LLC					
		F	imı/Company			
	6 Angelica Dr	ive			5	~≥
	Address					
	Avondale, PA	19311				93
		City/S	tate and Zip Code		["""] """ (· 20
	2483@courcest	net			ing.	≥
		E-mail address: (to be use	d for future annua	report notification)	LORIO RIO	
r further i	nfirmation concerni	ng this matter, phase call:			Drn D	=
Gli	a Aaron		484	905-1142		
	Name	of Contact Person	at (Daytime Telepho	ne Number	
Div Reg P.O	All ING ADDRESS vision of Corporation gistration Section D. Box 6327 lahassee, FL 32314			STREET ADDRESS Division of Corporation Registration Section Clifton Building 2661 Executive Center Tuilshassee, FL 32301	ons r Circle	
	a check for the follow 125.00 Piling Fee	ving amount: \$130.00 Filing Fee & Certificate of Status	S155.00 Filis		Filing Fee, Carl Cartified Copy	

THE PART OF STREET, STREET, PRINCIPLE PRINCIPLE

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 608.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. WaWo LLC (Name of Fore	reign United Liability Company; must locinde "Limited Liability Company," "LLC," or "LLC")	
(if name maveilable, enter al Liability Company," "L.L.C.	alternate name adopted for the purpose of transacting business in Florida. The alternate naise must include	e 'Limited
Delaware	46-5517220	
Z	of which foreign inuited liability (FEI number, if applicable)	
4. 10/16/2016		
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. 11500 SW Rossano La	- 14004 0 1 1 1 1 1 4 5 0 1 7 1 1	
Port Saint Lucie, Flori	ida 34987	
	(Street Address of Principal Officer)	
6. 6 Angelica DR		
Avondale, PA 19311	228	· sapers
	(Mailing Address)	ا مسمرہ
7. Name and street address	as of Florida registered agent: (P.O. Box NOT acceptable)	
Name:	C T Corporation System	131
Office Address:	1200 South Pine Island Road	
	Plantation Plorida 33324	•
Registered agent's accep	(City) (Zip code) >> "	
Having been named as re designated in this applica to complywith the provision accept the obligations of t	agistared agent and to accept service of process for the above stated limited liability company utlon, I hereby accept the appointment as registered agent and agree to act in this capacity. I found of all statutes relative to the proper and complete performance of my faities, and I am fairly position as registered agent. CT Corporation System Use President & Assistant	l flerther agrae millior with ex it
	(Registered agent's signature) secity and address of the person(s) who has/have suthority to manage is/are:	•
Deborah Farnung - Memb	ber 10380 SW Village Center Dr. #314 Port Saint Lucie Florid 34987	
Gis Aaron - Member 103	380 SW Village Center Dr. #314 Port Saint Lucie Florid 34987	
jurisdiction under the law of the translator must be su This document is executed	Signature of an authorized person in accordance with section 605.0203 (1) (b) Florida Statutes Large ways that are 610 in	e under oath
submitted in a document to	Gis Asron	
	Typed or printed name of signee	

1027



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO REREBY CERTIFY "WAWO LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF OCTOBER, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5665395 8300 You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203155720

Date: 10-13-16