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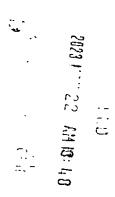
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T. LEMIEUX
JUN - 3 2023

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TO:

# COVER LETTER

WC HOME & REMODELING, L.L.C. CT:		
Nan	ne of Limited Liability Company	
closed "Application by Foreign Limited Liability ace, and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Cer referenced foreign limited liability company to transact business	
return all correspondence concerning this matter	to the following:	
Wilson Thomas Baker		
	Name of Person	
	Firm/Company	
8359 Bencon Blvd #212	• •	
6557 DERCOI DIVILETT		
	Address	
Fort Myers, F1, 33907		
C	ity/State and Zip Code	
wilson.baker@gmail.com		
E-mail address: (to b	e used for future annual report notification)	
ther information concerning this matter, please ca	II:	
Wilson Baker	210 464-2477	
Name of Contact Person	at () Area Code Daytime Telephone Number	
Mailing Address: Registration Section	Street Address:	
Division of Corporations	Registration Section Division of Corporations	
P.O. Box 6327	The Centre of Tallahassee	
Tallahassee, FL 32314	The Control of Farmanage	
	Tallahassee, FL 32303	

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

IN COMPLIANCE WITH SECTION 605,0002, FLORIDA STATUTEN THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. None of the name	ling, L.L.C. Limited Liability Company, must include "Limite	11 11 4				
1.8ame of Poreign	familied famility Company, must include "family	at Lability Co.	mpany," "L. I. C.," or "LL.	()		
It name unavailable, enter alternate	name adopted for the purpose of transacting business in F	lorida. Lite alteri	nate name musi melude "I imi	ted Liability Comp	any," "E. L. C	`or:"l.l.(
Louisiana		83	2-0846097			
•	high foreign limited liability company is organized)	3. <u> </u>				
chinistiction under the law of which foreign limited liability company is ofganized)			3. (Lt number, it applicable)			
·	(Date first transacted business in Florida, if prior to (See sections 605 090) & 605 0905, F.S. to determ	Tegistration 1				
	(See sections 605 6904 & 605 6905, F.S. to determ	one penalty habil	ny)			
536 Hwy 162		536	5 Hwy 162			
Street Address of Principal Office)		6	(Mailing Address)			
Benton, LA 71006		t)				
Betton, LA 7100		Bei	nton, LA 71006			
						<del></del>
					. ~9	
					2023	
7. Name and <u>street addres</u>	ss of Florida registered agent: (P.O. Box	NOT acce	ptable)		***	
					× 2	•
	Wilson Thomas Baker				rò	
Name:					<u>≯**</u> : <u>≭</u>	<del>(</del>
	9350 D DI 1 #313			-	ফু	
Office Address:	8359 Beacon Blvd #212				<b>5</b> 77	
			<del></del>	•	ස	
	Fort Myers		33907 Florida			
	(City)		110110a (Zip cod	le i		

### Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Member       Address:       207 Silver Leaf Dr         Authorized       Benton, LA 71006       Benton, LA 71006         Person       Person       Benton, LA 71006         DOther       DOther       DOther         DAmanager       Name:       William J Cooley         Member       Address:       323 Oak Glen Dr         Member       Address:       323 Oak Glen Dr         DAuthorized       Bossier City, LA 71111       Authorized         Person       Person       DOther       DOther         DOther       DOther       DOther       DOther         Manager       Name:       Member       Address:         Member       Address:       Member       Address:	Title or Capacity:	Name and Address:	Title or Capacity:	Name and Address:
Member       Address:       307 Gristmill Dr       Member       Address:       207 Silver Leaf Dr         Dauthorized       Benton, LA 71006       Description       Benton, LA 71006         Person       Person       Dother       Dother       Dother         Dother       Dother       Dother       Wilson Thomas Baker         Manager       Name:       316 Nightfall Court       Member       Address:       323 Oak Glen Dr         Dauthorized       Bossier City, LA 71111       Authorized       San Antonio, TX 78209         Person       Dother       Dother       Dother       Dother         Manager       Name:       Member       Address:         Member       Address:       Member       Address:         Member       Address:       Member       Address:	■Manager	Name: David Gregory Williams	□Manager	Name: Robert Doyle William
□Authorized Benton, LA 71006   Person Person   □Other	■Member		■Member	Address: 207 Silver Leaf Dr
□Other_ □Other □Manager Name: Wilson Thomas Baker  ■Member Address: 316 Nightfall Court □Member Address: 323 Oak Glen Dr  ■Authorized Bossier City, LA 71111 ■ Authorized San Antonio, TX 78209  Person □Other_ □Other □Ot	□Authorized	Benton LA 71006	□Authorized	Benton, LA 71006
□Manager       Name:       William J Cooley       □Manager       Name:       Wilson Thomas Baker         ■Member       Address:       323 Oak Glen Dr         ■Authorized       Bossier City, LA 71111       ■Authorized       San Antonio, TX 78209         □Other       □Other       □Other       □Other         □Manager       Name:       □Other         □Member       Address:       □Member         □Authorized       □Authorized         Person       Person	Person		Person	
■ Member Address: 316 Nightfall Court □ Member Address: 323 Oak Glen Dr   □ Authorized Bossier City, LA 71111 ■ Authorized San Antonio, TX 78209   □ Person □ Other □ Other □ Other   □ Manager Name: □ Member Address:   □ Member Address: □ Member Address:   □ Authorized □ Authorized   Person Person Person	□Other	Other	□Other	Other
□Authorized Bossier City, LA 71111 □Authorized San Antonio, TX 78209   Person Person   □Other □Other □Other □Other      Manager   Name:	□Manager	Name: William J Cooley	□Manager	Name: Wilson Thomas Baker
□Authorized Bossier City, LA 71111 □Authorized San Antonio, TX 78209   Person Person   □Other □Other □Other □Other      Manager   Name:	■Member	Address: 316 Nightfall Court	□Member	Address: 323 Oak Glen Dr
□Other         □Other         □Other         □Other           □Manager         Name:         □Manager         Name:           □Member         Address:         □Member         Address:           □Authorized         □Authorized           Person         Person	□Authorized	Bossier City, LA 71111	■Authorized	San Antonio, TX 78209
□Manager         Name:	Person		Person	
□Member         Address:	□Other	□Other	□Other	□Other
Person Person Person	⊡Manager	Name:	□Manager	Name:
Person Person	□Member	Address:	□Member	Address:
	□Authorized		□Authorized	
	Person		Person	
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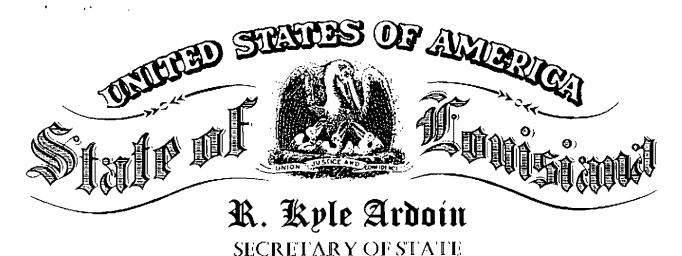
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)
- 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, 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 s.817.155, F.S.

Wilson Thomas Baker

Typed or printed name of signer

Typed or printed name of signer



As Secretary of State, of the State of Louisiana, I do hereby Certify that

the Articles of Organization of

## WC HOME & REMODELING, L.L.C.

Domiciled at BENTON, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on November 01, 2013,

I further certify that no Certificate of Dissolution or Termination has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

May 17, 2023

TARY OF STREET

Certificate ID: 11731735#HHH62

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

Secretary of State

Web 41330735K