

M24000013862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

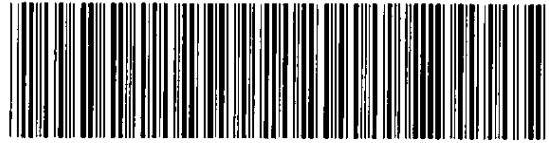
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900428172559

900428172559
04/25/24--01001--011 P10000

FILED

2024 OCT 29 PM 3:53

SECRETARY OF STATE
TALLAHASSEE, FL

M. SOLOMON
OCT 30 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WAT Opportunities, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Lena Abshire

Name of Person

Firm/Company

2111 E County Road 466

Address

Oxford, FL 34484

City/State and Zip Code

lenaabshire@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Lena Abshire

352

745-2580

Name of Contact Person

at ()

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

RECEIVED
TALLAHASSEE, FL
OCT 29 PM 3:53

FILED

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. WAT Opportunities, LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "L.L.C.," or "LLC")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC")

2. Wyoming
(Jurisdiction under the law of which foreign limited liability company is organized)

3. (LLC number, if applicable)

4. 04/20/2024
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0901 & 605.0902, F.S. to determine penalty liability)

5. 2111 E County Road 466
(Street Address of Principal Office)

6. 2111 E County Road 466
(Mailing Address)

Oxford, FL 34484

Oxford, FL 34484

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Lena Abshire

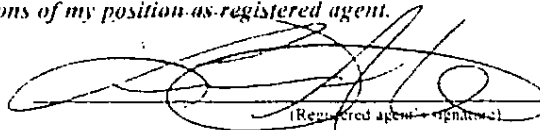
Office Address: 2111 E County Road 466

Oxford 34484
(City) Florida (Zip code)

FILED
2024 OCT 29 PM 3:54
CLERK OF STATE
TALLAHASSEE, FL

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]:

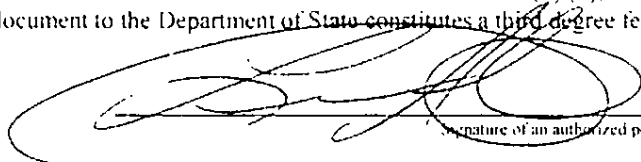
<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
<input checked="" type="checkbox"/> Manager	Name:	Lena Abshire		<input type="checkbox"/> Manager	Name:	William Thompson	
<input type="checkbox"/> Member	Address:	2111 E County Road 466		<input checked="" type="checkbox"/> Member	Address:	2111 E County Road 466	
<input type="checkbox"/> Authorized		Oxford, FL 34484		<input type="checkbox"/> Authorized		Oxford, FL 34484	
	Person				Person		
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:			<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:			<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized				<input type="checkbox"/> Authorized			
	Person				Person		
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:			<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:			<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized				<input type="checkbox"/> Authorized			
	Person				Person		
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input type="checkbox"/> Manager	Name:			<input type="checkbox"/> Manager	Name:		
<input type="checkbox"/> Member	Address:			<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized				<input type="checkbox"/> Authorized			
	Person				Person		
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	

FILED
2024 OCT 29 PM 3:54
SECRETARY OF STATE
TALLAHASSEE, FL

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.



Signature of an authorized person
Lena Abshire

Typed or printed name of signee

STATE OF WYOMING
Office of the Secretary of State

I, CHUCK GRAY, Secretary of State of the State of Wyoming, do hereby certify that
according to the records of this office,

WAT Opportunities, LLC
is a
Limited Liability Company

formed or qualified under the laws of Wyoming did on **April 16, 2024**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2024-001443114**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 29th day of October, 2024 at 10:05 AM. This certificate is assigned ID Number 077642629.



A handwritten signature in cursive script that reads 'Chuck Gray'.

Secretary of State



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 15, 2024

LENA ABSHIRE
2111 E COUNTY ROAD 466
OXFORD, FL 34484

SUBJECT: WAT OPPORTUNITIES, LLC
Ref. Number: W24000141067

We have received your document for WAT OPPORTUNITIES, LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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

Mel Solomon
Operations Manager A

Letter Number: 524A00022769

RECEIVED
OCT 29 2024