

# L04000001842

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H04000004032 3))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 205-0383

From: Account Name : CLARION VENTURES, INC.  
Account Number : I20030000026  
Phone : (801) 721-4788  
Fax Number : (801) 475-6420

04 JAN - 8 AM 11:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
FILED

## LIMITED LIABILITY COMPANY

### Up to the Sky Investments LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 0        |
| Page Count            | 3        |
| Estimated Charge      | \$125.00 |

incld Cover sheet

RECEIVED  
04 JAN - 8 AM 10:29  
DIVISION OF CORPORATION

1-8004

(H040000040323)

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:  
Up to the Sky Investments LLC

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:  
1270-E Parkside Green Drive  
West Palm Beach, Florida 33415

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

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

Michael Hart

Name

1270-E Parkside Green Drive

Florida street address (P.O. Box **NOT** acceptable)

West Palm Beach, FL 33415

City, State, and 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 608, F.S.*

*Michael Hart*

Registered Agent's Signature

(An additional article must be added if an effective date is requested)

*Michael Hart*

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Michael Hart

Typed or printed name of signee

**Filing Fees:**

\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)

(H040000040323)

04 JAN -8 AM 11:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED