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| (Re | questor's Name) | |
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| (Ad | dress) | |
| (Ad | dress) | |
| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | WAIT | MAIL |
| (Bu | siness Entity Nan | ne) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
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Office Use Only



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EXAMINER

10 JAN 19 PH 1: 25

LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

| | | Office Use Only | |
|---------------------------|---------------------|---|--|
| ORPORATION NAME(S) & DOCU | MENT NUMBER(S), (ii | f known): | |
| WWB ARC | | LLC | |
| (Corporation Name) | (Document#) | | |
| . (Corporation Name) | /D | | |
| (Corporation Name) | (Document #) | | |
| (Corporation Name) | (Document #) | | |
| | | | |
| (Corporation Name) | (Document #) | | |
| Walk in Pick up time | 2.06 | Certified Copy | |
| ☐ Mail out ☐ Will wait | ☐ Photocopy | Certificate of Status | |
| NUMBER OF TRACES | A RATERIUS ATERITE | | |
| NEW FILINGS | <u>AMENDMENTS</u> | | |
| Profit Not for Profit | | Amendment Resignation of R.A., Officer/Director | |
| Limited Liability | | Change of Registered Agent | |
| Domestication | | Dissolution/Withdrawal | |
| Other | ☐ Merger | · | |
| OTHER FILINGS | REGISTRATION/ | REGISTRATION/QUALIFICATION | |
| Annual Report | ☐ Foreign | , | |
| ☐ Fictitious Name | Limited Partner | rship | |
| | Reinstatement | | |
| | Trademark Other | · • | |
| | | | |
| | | Examiner's Initials | |
| CR2E031(7/97) | | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANS

ARTICLE I - NAME:

The name of the Limited Liability Company is: WWB Archiving, LLC

ARTICLE II - ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is:

900 Park Centre Blvd., Suite 456 Miami Gardens, Florida 33169

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

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

Raimundo Lopez-Lima Levi Name 201 Alhambra Circle, Suite 501 Florida Street address (P.O. Box not acceptable) Coral Gables, Fl 33134 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.

ARTICLE IV - Management (Check box if applicable.)

The Limited liability Company is to be managed by one manager or more managers and is, therefore, a manager- managed company.

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.)

> Raimundo Levi 201 Alhambra Circle, Suite 501 Coral Gables, Fl 33134