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Florida Department of State
Division of Corporations
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Fax Number : (850) 617-6383

From: Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608) 827-5300
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: matty_walker@me.com

FLORIDA LIMITED LIABILITY CO.
Matthew Walker LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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FAX AUDIT # **H12000131612 3**

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**ARTICLES OF ORGANIZATION
OF
Matthew Walker LLC**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the limited liability company shall be: Matthew Walker LLC

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:
1709 W. Watrous Ave, Tampa, Florida 33606.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 515 E. Park Avenue, Tallahassee, Florida 32301. Located in the County of Leon.

ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the managers and the name and address of the manager of the Limited Liability Company is:

Matthew Walker, 1709 W. Watrous Ave, Tampa, Florida 33606



Date: May 15, 2012

Business Filings Incorporated, Organizer
Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison,
WI 53717

608-827-5300

FAX AUDIT # **H12000131612 3**

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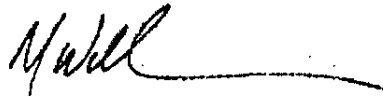
**CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE
UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **Matthew Walker LLC**

The name and address of the registered agent and office is **Business Filings Incorporated, 515 E.
Park Avenue, Tallahassee, Florida 32301. Located in the County of Leon.**

Having been named as registered agent and to accept service of process for the above stated
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.



Signature: _____
Mark Williams, A.V.P. Business Filings Incorporated

Date: *May 15, 2012*

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TALLAHASSEE, FLORIDA

FAX AUDIT # H12000131612 3