

L 12000072261

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

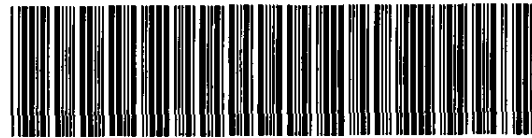
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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12 MAY 29 PM 1:57  
STATE  
TALLAHASSEE, FLORIDA

B. BOSTICK

MAY 30 2012

EXAMINER

# LAURA A. OLSON, P.A.

ATTORNEY-AT-LAW

LAURA A. OLSON, ESQUIRE  
MARCIA M. KORBAR, LEGAL ASSISTANT

200 N. PIERCE ST. - 4<sup>TH</sup> FLOOR  
TAMPA, FLORIDA 33602  
TELEPHONE: (813) 222-0888  
TELECOPIER: (813) 222-0808

May 24, 2012

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

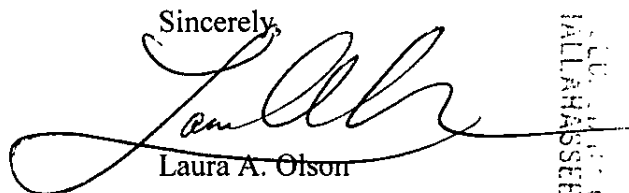
RE: Filing of Articles of Organization for Limited Liability Company  
CLOUD WALKERS, LLC

To Whom It May Concern:

Enclosed for filing please find the original and one (1) copy of the Articles of Organization for Limited Liability Company for the above corporation. Also enclosed is a check in the amount of \$125.00 to cover the cost of the filing. Please file the original Articles of Organization for Limited Liability Company, stamp the date of filing on the copy and return to the undersigned for our records. A self-addressed stamped envelope is enclosed for your convenience.

If you have any questions, please do not hesitate to call.

Sincerely,



Laura A. Olson

LAO/mmk  
Enclosures

FILED  
12 MAY 29 PM 1:57  
TALLAHASSEE, FLORIDA

## ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is: CLOUD WALKERS, LLC

### ARTICLE II - Address:

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

#### Principal Office Address:

200 N. Pierce Street - 4th FL  
Tampa, Florida 33602

#### Mailing Address:

200 N. Pierce Street - 4th FL  
Tampa, Florida 33602

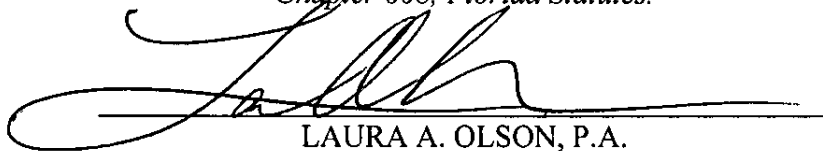
### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered agent. You must designate an individual or another business entity with an active Florida registration.)

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

Laura A. Olson, P.A.  
200 N. Pierce Street - 4th FL  
Tampa, Florida 33602

*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, Florida Statutes.*



LAURA A. OLSON, P.A.

12 MAY 29 PM 1:57  
CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA

### ARTICLE IV - Manager(s) or Managing Member(s):

#### Title:

"MGR" = Manager

"MGRM" = Managing Member

#### Name and Address:

John W. Brotherton MGRM/MBR

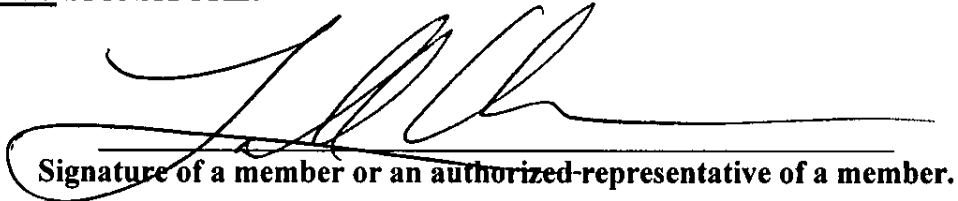
637 Hudson Avenue, Tampa, FL 33602

Laura A. Olson MBR

637 Hudson Avenue, Tampa, FL 33602

ARTICLE V - Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

  
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. 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 Section 817.155 Florida Statutes.

LAURA A. OLSON  
Typed or printed name of signee

FILED  
12 MAY 29 PM 1:57  
DEPT. OF STATE  
TALLAHASSEE, FLORIDA