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FLORIDA LIMITED LIABILITY CO. CLOUD COMMUNICATIONS LLC

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EXAMINER

H12000429740
ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:
Cloud Communications LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
7221 GN 133 AVL MAHI TL 33183
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:
William Collago
Name
7221 SW 133 AVE
Florida street address (P.O. Box NOT acceptable)
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
Registered Agent's Signature (REQUIRED)

Page 1 of 2

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<u>Title:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	William Collado
	MIAMI FL 33183
	<u> </u>
 _	
(Use attachment if necessary)	
	the date of filing: (OPTIONA)
Tective date is listed, the date mus	t be specific and cannot be more than five business days
Tective date is listed, the date mus	t be specific and cannot be more than five business days
fective date is listed, the date mus days after the date of filing.)	t be specific and cannot be more than five business days
fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE:	t be specific and cannot be more than five business days
fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a great constitutes an affirmation upon the date of the d	after or an authorized representative of a member. 608.408(3), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true.
fective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a recordance with section constitutes an affirmation using a management of a may a may be seen as the constitutes an affirmation using a may be seen as the constitutes and a may be seen as the constitute of a may be seen as the constitution of a may be se	the specific and cannot be more than five business days after or an authorized representative of a member. 608.408(3), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true, formation submitted in a document to the Department of State slony as provided for in s,817.155, F.S.)

Page 2 of 2

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