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SECRETARY OF STATE DIVISION OF CORPORATION

SEP 2 1 2012

T. HAMPTON

# **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Waterloo Consulting,	LLC
	nited Liability Company
The enclosed Articles of Organization and fee(s) a	re submitted for filing.
Please return all correspondence concerning this m	eatter to the following:
Leigh Williams	
	Name of Person
Swann Hadley Stump Di	etrich & Spears, P.A.
	Firm/Company
1031 W. Morse Blve., Sui	te 350
	Address
Winter Park, FL 32789	
	City/State and Zip Code
adwthird@gmail.com	
E-mail address: (to be use	d for future annual report notification)
For further information concerning this matter, plea	ase call:
Arthur Wellington	at ( 312 ) 855-3248
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\sum \text{Status}\$130.00 Filing Fee \$\&\text{Certificate of Status}\$	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section  Division of Corporations Clifton Building 2661 Executive Center Circle

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<b>ARTICLE I - Name:</b> The name of the Limited Liability Company is	
or Z Z	:
Waterloo Consulting, LLC	
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
1630 Common Way Road, Apt. 202 Orlando, FL 32814	1630 Common Way Road, Apt. 202 Orlando, FL 32814
(The Limited Liability Company cannot serve as its own Regi business entity with an active Florida registration.)	Orlando, FL 32814  egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
The name and the Florida street address of the	
	<del></del>
1031 W. Morse E	Blvd., Suite 350
Florida street ad	dress (P.O. Box <u>NOT</u> acceptable)
Florida street ac	dress (P.O. Box <u>NOT</u> acceptable)  FL 32789  tate, and Zip

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(CONTINUED)

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

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Membe	er
MGRM	Arthur Wellington
	1630 Common Way Road, Apt. 202
	Orlando, FL 32814
(Use attachment if necessary)	
CLE V: Effective date, if other the fective date is listed, the date is days after the date of filing.)	han the date of filing: (OPTIONAmust be specific and cannot be more than five business day
REQUIRED SIGNATURE:	200/M
-()1	PART I WILLIAM STANKED

(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 s.817.155, F.S.)

## Leigh A. Williams

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)