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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Weather Tiger, LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Erica Staehling Name of Person
Weather Tiger, LLC Firm/Company
P. O. Box 894 Address
Tallahassee, FL 32302
City/State and Zip Code Weather tiger II c @ gmail E-mail address: (to be used for future annual report notification) Company Company
For further information concerning this matter, please call:
Erica Stachling at (410) 303-9179 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing Address Street Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

ARTICLE	I - Nam	e:
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The name of the Limited Liability Company is:

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:

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420	Pe	PDe	rida	ار ف	NAY	

P.O. Box 894 Tallahassee, FL 32302

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:

Nam

Florida street address (P.O. Box NOT acceptable)

llahassee

y Sta

7ir

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 605, F.S..

(CONTINUED)

Page 1 of 2

egistered Agent's Signature (REQUIRED)

15 AUG 21 PH 2: 36

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MAMBR.	trica Staehling
	2054 Pemeridae May
	Tallahasske, FC 323018
A # 4 B D	\mathcal{O}
AMDR	Kyan Truchelut
	Tall had to 2130k
	1011616552) FC 36300
ective date is listed, the date must b	date of filing: August 21, 2015. (OPTIONAL) e specific and cannot be more than five business days prior to or 90 days
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ARTICLE IV-

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)