

5/9/2019

via Corporation

# L19000121339

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000154949 3)))



H190001549493ABC9

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

## FLORIDA LIMITED LIABILITY CO. Work LLama Holdings LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

MAY 13 2019

ARTICLES OF ORGANIZATION  
OF WORKLLAMA HOLDINGS LLC

The undersigned authorized representative of a limited liability company under and pursuant to the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes, submits the following Articles of Organization:

ARTICLE I. NAME

The name of the company shall be WorkLLama Holdings LLC.

ARTICLE II. DURATION

The period of the Company's duration shall commence on the date of filing of these Articles of Organization and shall exist perpetually, unless terminated in accordance with the Company's operating agreement.

ARTICLE III. PURPOSE

The purpose for which the Company is being formed is to engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV. STREET AND MAILING ADDRESS OF PRINCIPAL OFFICE

The street address of the principal office of the Company shall be 1001 East Palm Ave, Tampa, Florida 33605.

ARTICLE V. REGISTERED AGENT

The street address of the initial registered office of the Company is CT Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324.

*[Signature page follows]*

2019 MAY 10 AM 9:22

IN WITNESS WHEREOF, the undersigned authorized representative has executed these Articles of Organization on this \_\_\_\_ day of May, 2019.

By: 

Robert J. Grammig, Authorized Representative

Registered Agent Acceptance

*Having been named registered agent and to accept service of process for WorkLLama Holdings LLC at the place designated in these Articles, I accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative 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.*

CT Corporation System, Inc.

Dated: May \_\_, 2019

By: 

Name:

Title: