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COVER LETTER

.

TO: New Filing Section Division of Corporations
SUBJECT: GW 360, LLC Name of Limited Liability Company
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:
Aaron Burgess Name of Person
Name of Person
6W360, LCC Firm/Company
16819 Front Beach Rd Unit 1201 Address
Address
PANAMA City Beach, FL 32413
PANGMG City Beach, FL 32413 City/State and Zip Code alee burgess @ Hotma, I. com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability (Company is:				
C	W 360	, LLC			
(Must conatir	the words "Limited Li	iability Compa	any, "L.L.C	.," or "LLC.")	
ARTICLE II - Address: The mailing address and street add	ress of the principal off	ice of the Lim	iited Liabili	ty Company is:	
<u>Principal</u>	Office Address:			Mailing Address:	
16819 From unit 1201 PARAMA CI	ty Brack F	<u> </u>	3	by agerlook So Wetumpica. Ac	2 <u>W</u> 36 693 —
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an act	annot serve as its own F	Registered Ago			
The name and the Florida street ad	dress of the registered a	agent are:			
	Haron	Burge.	5:5		
	16819 Fro	int Bea	ch Rd	unit 1201	
	Florida street address				
	Yanama City	Beach	FL.	32413	
	City	State		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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

19 DEC 18 PH 1:31

The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: (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.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. **REOUIRED SIGNATURE:**

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)