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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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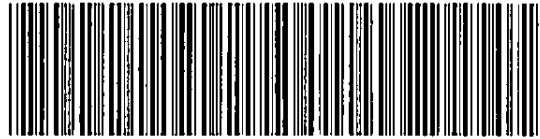
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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MAR 25 1M 1:20 PM '21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T.J.H.
3/1/24

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: VULCAN WISDOM LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sterling Clemons
VULCAN WISDOM LLC
13575 58th Street North
Suite 200
Clearwater, FL 33760

For further information concerning this matter, please call:

Sterling Clemons at (727) 496-3737

Enclosed is a check for the filing fee amount of \$125.00.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of this limited liability company (the "Company") is VULCAN WISDOM LLC.

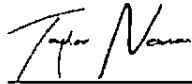
ARTICLE II – Address

The Company's principal office and mailing address will initially be at 13575 58th Street North, Suite 200, Clearwater, FL, 33760, but may be relocated by the Member at any time.

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The Company's initial designated office will be at 7901 4th St N, STE 300, Saint Petersburg, FL 33702, and the name of its initial agent for service of process at that address will be Northwest Registered Agent LLC. The Company's designated office and its agent for service of process may only be changed by filing notice of the change with the Secretary of State of the state in which the articles of organization of the Company were filed.

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)

ARTICLE IV – Grant of Authority to Manage and Control

The name and address of each person authorized to manage and control Vulcan Wisdom LLC: (the "Authorized Member" or "AMBR")

<u>Title</u>	<u>Name and Address</u>
AMBR	Sterling Clemons 13575 58th Street North Suite 200 Clearwater, FL 33760

ARTICLE V – Effective Date

Effective date, if other than the date of filing: March 17, 2024

(CONTINUED)

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ARTICLE VI - Purposes and Powers.

The Company is formed for the purpose of engaging in any lawful business that a limited liability company may engage in under the Act. The Company has the power to do all things necessary, incident, or in furtherance of that business.



Authorized 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.

Sterling B. Clemons

Printed Name of Signee

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TALLAHASSEE, FLORIDA