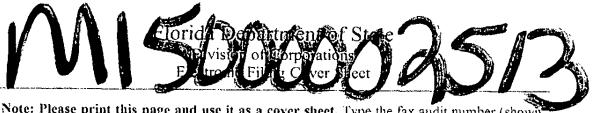
Division of Corporations



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(((H150000229803)))



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To:

Division of Corporations

Fax Number : (850)617~6383

From:

Account Name : LEGALZOOM.COM INC.
Account Number : 120010000062
Phone : (323)962-8600
Fax Number : (323)962-3889

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

Email Address:_

Foreign Limited Liability Company CLOUD VIEW TECHNOLOGIES, LLC

Certificate of Status	0
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1/30/2015 2:19:30 PM PAGE 1/001 Fax Server



January 30, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LEGALZOOM.COM INC

SUBJECT: CLOUD VIEW TECHNOLOGIES, LLC

REF: W15000006919

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II FAX Aud. #: H15000022980 Letter Number: 115A00001939

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section Division of Corporation	HIS				
CLOUD	VIEW TECH	NOI OGIF	ES LLC		
SUBJECT: CLOOD		ted Liability Company			
The enclosed "Application by Fu Existence, and check are submin	oreign Limited Liability Conted to register the above refe	npany for Authorizat renced foreign limite	ion to Transact Business in Flo ed liability company to transac	orida," Certificate of t business in Florida	
Please return all correspondence	concerning this matter to th	e following;			
	lm	elda Vasquez			
)	Name of Person			
Legalzoom.com, Inc.					
Firm/Company					
100 W. Broadway Suite 100					
		Address			
Glendale, CA 91210					
City/State and Zip Code					
		s.thies@cloudte			
	E-mail address: (to be use	ed for future annual rep	ort notification)		
For further information concerning	ng this matter, please call:				
lmelda Vasquez		323	962-8600		
Name	of Contact Person	Area Code	Daytime Telephone Numb	er	
MAILING ADDRESS Division of Corporation Registration Section P.O. Box 6327 Tallahassec, Fl. 32314	S Division Registr Cliftor 2661 E	ET ADDRESS: on of Corporations ration Section Building Executive Center Circ assec, FL 32301	ele 29	2015 APR	
Enclosed is a check for the \$125,00 Filing Fee	following amount: \$130.00 Filing Fee & Certificate of Status	■ \$155.00 Filing Certified Copy		//Y	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREKIN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: 1 CLOUD VIEW TECHNOLOGIES, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C." or "LLC.") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC,") Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 7/01/2014 (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 151 Mary Esther Blvd., Mary Esther, FL 32547 (Street Address of Principal Office) (Mailing Address) 7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are: Vartan Ajamian, Member, 22883 Quicksilver Drive, Dulles, VA 20166 Charles Thies, Member, 151 Mary Esther Blvd, Suite 311, Mary Esther, FL 32569 Salvatore Signorino, Member, 5013 Burnside Farm Pl, Haymarket, VA 20169 David Pallai, Member, 65 Bay View Rd, Duxbury, MA 02332 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translation must be submitted) Signature of an authorized person In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts gaited aun aware that may false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. \$77,155.

Typed or printed name of signee

Charles Thies

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	f the Limited Liability Company VIEW TECHNOLO				
If unavailable,	the alternate to be used in the star	te of Florida is:			
2. The name a	nd the Florida street address of th	e registered agent and office are:		-	
	United States Con	poration Agents, Inc.	13.	<u>~</u> a	
		(Name)	· 戶類 豆熟	25	C State Open
	13302 Winding Oa	aks Court, Suite A		2015 APR-	i Chier
Florida Street Address (P.O. Box NOT ACCEPTABLE)				-7	
	Tampa	FL 33612	11 to 12 to	A X	
		City/State/Zip		œ. 5	£

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, Florida Statutes.

(Signature)
Cheyenne Moseley, Assistant Secretary on behalf of United States Corporation Agents, Inc.

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)

\$ 30,00 Certified Copy (optional) \$ 5,00 Certificate of Status (optional) Y () ()

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CLOUD VIEW TECHNOLOGIES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CLOUD VIEW TECHNOLOGIES, LLC" WAS FORMED ON THE FOURTEENTH DAY OF NOVEMBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

5065179 8300

150426906

AUTHENTICATION: 2244137

DATE: 03-27-15

You may verify this certificate online at corp, delaware.gov/authver.shtml