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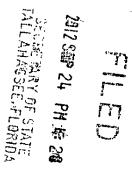
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PICK-UP	WAIT MAIL
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Certified Copies	Certificates of Status
Special Instructions to Fil	ling Officer:
	A. LUNT
	SEP 26 2012
	EXAMINER

Office Use Only



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COVÉR LÉTTER

TO: Registration Division of C	Section Corporations		•
SUBJECT:	Hollywood C	Blobal Solutions, LLC	
SOBJECT:		ed Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	E	Beata Biro	
		Name of Person	
	Hollywood (Global Solutions, LLC	
		Firm/Company	
	21	01 Anton Ter	2012 SE
		Address	五元 喝 2
		wood, FL 33020	SER
	Cit	y/State and Zip Code	
	beata	piro@bellsouth.net	E, FLOR D
	E-mail address: (to be used	for future annual report notification)	9 :4
For further informatio	n concerning this matter, pleas	e call:	
В	eata Biro	at (954) 817 7	123
Nam	e of Person	Area Code & Daytime Telephone	Number
Enclosed is a check	for the following amount:		
S125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Ce (additional copy is enclosed) Cc	60.00 Filing Fee, rtificate of Status & rtified Copy ditional copy is enclos
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:
Hollywood Glo	bal Solutions, LLC
(Must end with the words "Limit	ted Liability Company. "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address o	f the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2101 Anton Ter Hollywood, FL 33020	2101 Anton Ter Hollywood, FL 33020
(The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are:
	Name
2101	Anton Ter
Florida s	treet address (P.O. Box NOT acceptable)
Hollywood	_{FL} 33020
	City, State, and Zip
liability company at the place designal registered agent and agree to act in this constant the relating to the proper and compaccept the obligations of my position.	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all plete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S

Page 1 of 2

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGRM" = Managing Member	
MGRM	Beata Biro
	2101 Anton Ter
	Hollywood, FL 33020
	· 50
	
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(Use attachment if necessary)	D-
(Use attachment if necessary) LE V: Effective date, if other than the	e date of filing: (OPTION)
LE V: Effective date, if other than the fective date is listed, the date must b days after the date of filing.)	D*
LE V: Effective date, if other than the fective date is listed, the date must b days after the date of filing.)	e date of filing: (OPTION)
LE V: Effective date, if other than the fective date is listed, the date must b days after the date of filing.) REQUIRED SIGNATURE:	e date of filing: (OPTION)
LE V: Effective date, if other than the fective date is listed, the date must b days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a may are that any false information under the section of	e date of filing: (OPTION to specific and cannot be more than five business dates

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)