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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

TIME COMMUNICATION, LLC
(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:

Samir Ali
(Name of Person)

Gwinnett Accounting & Tax Services
(Firm/Company)

3100 Breckinridge Blvd Ste 145
(Address)

Duluth, GA 30096
(City/State and Zip Code)

For further information concerning this matter, please call:

Samir Ali
(Name of Person)

at (770) 935-4424 or Fax at (770) 935-4423
(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section Division
of Corporations 409 E.
Gaines Street Tallahassee,
Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida
32314

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TIME COMMUNICATION, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

300 Mary Esther Blvd
Unit 7K
Mary Esther, FL 32569

Mailing Address:

1116 Scenic View Trace
Lawrenceville, GA 30044

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

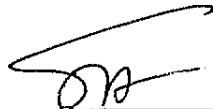
The name and the Florida street address of the registered agent are:

AMEEN CHAGANI
Name

300 Mary Esther Blvd Unit 7K
Florida street address (P.O. Box NOT acceptable)

Mary Esther, FL 32569
City, State, and 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 608, F.S..



Registered Agent's Signature

(CONTINUED)

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PALM BEACH, FLORIDA

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

AMEEN CHAGANI
1116 Scenic View Trace
Lawrenceville, GA 30044

MGRM

AMYNAH BHADANI
1116 Scenic View Trace
Lawrenceville, GA 30044

MGRM

SAMIR ALI
3100 Breckinridge Blvd Ste 145
Duluth, GA 30096

(Use attachment if necessary)

Note: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Samir Ali

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)

\$5.00 Certificate of Status (Optional)

SECRETARY OF STATE
ALABAMA, FLORIDA

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