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(Address)

(City/State/Zip/Phone #)

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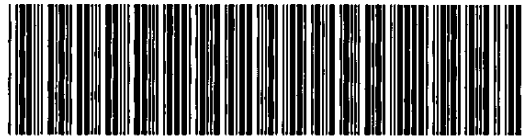
(Business Entity Name)

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[Handwritten signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLOBAL YOUTH DEVELOPMENT FOUNDATION, 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:

NOEL MILLER

(Name of Person)

(Firm/Company)

5840 NW 14TH COURT

(Address)

SUNRISE, FLORIDA 33313

(City/State and Zip Code)

For further information concerning this matter, please call:

NOEL MILLER

(Name of Person)

at (754) 234-0391

(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)

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

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**ARTICLES OF ORGANIZATION
FOR
GLOBAL YOUTH DEVELOPMENT FOUNDATION, LLC**

The undersigned, for the purpose of forming a Limited liability company pursuant to s. 608.407, Florida Statutes, hereby adopts the following Articles of Organization:

ARTICLE I - Name:

The name of the Limited Liability Company is:

GLOBAL YOUTH DEVELOPMENT FOUNDATION, LLC

ARTICLE II - Address:

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

**5840 NW 14TH COURT
SUNRISE, FLORIDA 33313**

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

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

Noel Miller

5840 NW 14th Court

Sunrise, Florida 33313

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..

Noel Miller

Registered Agent's Signature

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ARTICLE IV- Management:

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

NOEL MILLER
5840 NW 14TH COURT
SUNRISE, FLORIDA 33313

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(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.)

Noel K Miller

Signature of a member of 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.)

NOEL MILLER

Typed or printed name of signee

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