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TO:

Registration Section

Division of Corporations

SUBJECT: ExecuTechs Plus Real Estate & Relocation Services 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:

	Kathy L Gouge-Gonzalez		_
	(Name of Person)	•	
	ExecuTechs Plus Real Estate & Relocation Services LLC		_
	(Firm/Company)		
	1835 E Hallandale Beach Blvd #367		_
	(Address)		
	Hallandale Beach, FL 33009	SEC)7 OC
	(City/State and Zip Code)	法院	_
	rther information concerning this matter, please call:	VAY OF ST	5 PH :
Katr	ny L Gouge-Gonzalez 414-1501		9
	(Name of Person) (Area Code & Daytime Telephone Number)		
Enclos	sed is a check for the following amount:		
\$125.	.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is	Status &	

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

EN N#21-1193128

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ExecuTechs Plus Real Estate & Relocation Services LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:		
111 Golden Isles Dr #E-1	1835 E Hallandale Beach Blvd #367		
Hallandale Beach, FL 33009	Hallandale Beach, FL 33009		
	egistered Office, & Registered Agent's sown Registered Agent. You must designate an indivi		
The name and the Florida street address	s of the registered agent are:	~~~	0
ExecuTechs F	Plus, Inc	SECHE MILAH	07 OCT
	Name	美尚	

1835 E Hallandale Beach Blvd #367

Florida street address (P.O. Box NOT acceptable)

Hallandale Beach, FL 33009

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 (REQUIRED)

(CONTINUED)
Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member			
MGR	Kathy L Gouge-Gonzalez		
	111 Golden Isles Dr #E-1	•	
	Hallandale Beach, FL 33009		
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(Use attachment if necessary)		I: 09 STATE ORIDA	
ARTICLE V: Effective date, if other than the	date of filing:	(OPTIONAL)	
(If an effective date is listed, the date must be	e specific and cannot be more than f	ive business days pri	or
to or 90 days after the date of filing.)			
,			

REQUIRED SIGNATURE:

Signature of a memb 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.)

Kathy L Gouge-Gonzalez

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)