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Certified Copies	Certificates	s of Status
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EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STRATEGY GLOBAL 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:

TIM HANGG	E			
		Name of Person		
		Firm/Company		
9753 66th St	#382			
		Address		
Pinellas Park	, FL 33782			2011 SE
	Ci	y/State and Zip Code	;	ZUIII AUG 10 SECRETARI
	E-mail address: (to be used	for future annual repo	ort notification)	- 13 TO
For further information	concerning this matter, pleas	e call:		TO TO
TIM HANGGE		at (727	667-2386	
Name	of Person	Area Code	& Daytime Telephone N	
Enclosed is a check f	or the following amount:			
□\$125.00 Filing Fee	☑\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	py Certi	.00 Filing Fee, ificate of Status & ified Copy

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

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

i Musi chu whii ilic wotus Li	imited Liability Company, "L.L.C.," or "LLC.")
,	and Daving Company, Sizion, or Sizon,
ARTICLE II - Address:	af the mineral office of the Limited Lightlity Company is:
The maining address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9753 66th St #382	9753 66th St #382
Pinellas Park, FL 33782	Pinellas Park, FL 33782
	The state of the s
(The Limited Liability Company cannot serve as it business entity with an active Florida registration. The name and the Florida street address	egistered Office, & Registered Agent's Signatures s own Registered Agent. You must designate an individual or another
(The Limited Liability Company cannot serve as it business entity with an active Florida registration.	egistered Office, & Registered Agent's Signatures s own Registered Agent. You must designate an individual or another as of the registered agent are:
(The Limited Liability Company cannot serve as it business entity with an active Florida registration. The name and the Florida street address TIM HANGGE	egistered Office, & Registered Agent's Signatures s own Registered Agent. You must designate an individual or another ss of the registered agent are:
(The Limited Liability Company cannot serve as it business entity with an active Florida registration.) The name and the Florida street address TIM HANGGE 9753 66th St #38	egistered Office, & Registered Agent's Signatures s own Registered Agent. You must designate an individual or another as of the registered agent are:
(The Limited Liability Company cannot serve as it business entity with an active Florida registration.) The name and the Florida street address TIM HANGGE 9753 66th St #38	egistered Office, & Registered Agent's Signatures s own Registered Agent. You must designate an individual or another ss of the registered agent are:
(The Limited Liability Company cannot serve as it business entity with an active Florida registration.) The name and the Florida street address TIM HANGGE 9753 66th St #38	egistered Office, & Registered Agent's Signatures sown Registered Agent. You must designate an individual or another ass of the registered agent are: Name Name 82 la street address (P.O. Box NOT acceptable)

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

liability company at the place designated in this certificate, I hereby accept the appointment as

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	BEN HOSKINS	
	9753 66th St #382	
	Pinellas Park, FL 33782	
MGR	CHRIS COLLBRAN	
	9753 66th St #382	
	Pinellas Park, FL 33782	
MGR	DAN DOYLE	
	9753 66th St #382	
	Pinellas Park, FL 33782	
MGR	TIM HANGGE	
	9753 66th St #382	
	Pinellas Park, FL 33782	
(Use attachment if necessary) LE V: Effective date, if other than the		AUG TO NATIONAL
fective date is listed, the date must l days after the date of filing.)	be specific and cannot be more than five bus	iness da
REQUIRED SIGNATURE:	2m	
(In accordance with so	ection 608.408(3), Florida Statutes, the execution	
of this document cons that the facts stated he	stitutes an affirmation under the penalties of perjury	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

TIM HANGGE

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee