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FLORIDA LIMITED LIABILITY CO.  
TVGN SOLUTIONS LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

T. CUNE

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EXAMINER

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

**TVGN SOLUTIONS LLC**

### ARTICLE II - Address:

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

**10474 NW 31 Terrace  
Doral FL 33172**

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

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

**GILLIAN BREAKSPEARE**

**10474 NW 31 TERRACE**

**DORAL FL 33172**

*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

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### Article IV - Management (Check box if applicable)

☐ The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager - managed company.

  
\_\_\_\_\_  
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.)

**Gillian Breakspeare**  
\_\_\_\_\_  
Typed or printed name of signor