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B. BOSTICK

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EXAM\*\*\*\*

(850) 245-6051.

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

AOR 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:

## **David Gray**

Name of Person

## **AOR Global LLC**

Firm/Company

# 2234 N Federal Highway, #413

Address

# Boca Raton, FL 33431

City/State and Zip Code

## dgray@AORglobal.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Gray

561

249-4140 x 102

Name of Person

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

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	y Company is:		
AOR Global LLC			
(Must end with the wo	rds "Limited Liability Company, "L.L.C.," or "Ll.C.")		
ARTICLE II - Address:			
The mailing address and street ad	dress of the principal office of the Limited Lia	ability Com	pany is
Principal Office Address:	Mailing Address:		
2234 N Federal Highway, #413	2234 N Federal Highway, #413		
Boca Raton, FL 33431	Boca Raton, FL 33431		
business entity with an active Florida regist	re as its own Registered Agent. You must designate an individuation.)  ddress of the registered agent are:	dual or another	2000
David Gray			
David Gray	Name	) V-1 P-1	~ ·
		у., Г.	- (1)
650 West Aver		96. 96.	- (1)
650 West Aver	nue, #2210		18 51 2:59
650 West Aver	nue, #2210 Florida street address (P.O. Box <u>NOT</u> acceptable)		- (1)

(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:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Membe	r
MGRM	David Gray
	650 West Ave., #2210
	Miami Beach, FL 33139
MGR	Hayden Trepeck
	1361 SW 15th Street
	Boca Raton, FL 33486
<del></del>	
(Use attachment if necessary)	
CLE V: Effective date, if other the effective date is listed, the date	han the date of filing: (OPTION)  e must be specific and cannot be more than five busine
CLE V: Effective date, if other the	e must be specific and cannot be more than five busine
CLE V: Effective date, if other the effective date is listed, the date of file or 90 days after the date of file.	e must be specific and cannot be more than five busine
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CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of fill REQUIRED SIGNATURE:  Signature of a (In accordance with sec-	member or an authorized representative of a member.
CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of file REQUIRED SIGNATURE:  Signature of a  (In accordance with seconstitutes an affirmatical am aware that any fals	member or an authorized representative of a member.  tion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true, it information submitted in a document to the Department of State
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CLE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of file REQUIRED SIGNATURE:  Signature of a  (In accordance with seconstitutes an affirmatical am aware that any fals	member or an authorized representative of a member.  tion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true, it information submitted in a document to the Department of State

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

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