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B. BOSTICK
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FXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	CCT: GLOBAL HOMEBUYERS LLC Name of Lir	nited Liability Company
The end	closed Articles of Organization and fee(s) as	re submitted for filing.
Please	return all correspondence concerning this m	natter to the following:
	GILLIAN SOLOMON	Name of Person
	GLOBAL HOMEBUYERS LLC	Firm/Company
	8747 NW 50TH STREET	Address
	LAUDERHILL, FLORIDA 33351	Ye (Core and The Cort
المال	YAT/GLC GMAIL COM	City/State and Zip Code d for future annual report notification)
For furt	ther information concerning this matter, plea	
ILLYA	TINKER at (at (954) 514-7477 Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:	27
☑ \$125.0	0 Filing Fee □\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □\$160.00 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

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
GLOBAL HOMEBUYERS LLC	2. 41. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	#1 1 C 20
(Must end with the words "Limi	ited Liability Company, "L.L.C.,"	or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability C	Company is:
Principal Office Address:	Mailing Address:	
8747 NW 50TH STREET LAUDERHILL, FL 33351	8747 NW 50TH STREE LAUDERHILL FL, 3335	
ARTICLE III - Registered Agent, Registered Offi (The Limited Liability Company cannot serve as its canother business entity with an active Florida registra	own Registered Agent. You must of ation.)	
The name and the Florida street address of the registe	ered agent are:	
GILLIAN SOLOMON	ame	
IN C	ame	
8747 NW 50TH STREET	<u> </u>	
Florida street address (P.O.	Box NOT acceptable)	T
LAUDERHILL	FL 33351	
City	Zip	

Page 1 of 2

(CONTINUED)

<u> Citle:</u>	Name and Address:
'AMBR" = Authorized Member	
MGR" = Manager	
MGR	ILLYA TINKER
	8747 NW 50TH STREET
	LAUDERHILL, FLORIDA 33351
MGR	GILLIAN SOLOMON
	8747 NW 50TH STREET
	LAUDERHILL, FLORIDA 33351
	ENOBER HILLI CONDITIONS
Use attachment if necessary)	
tive date is listed, the date must be	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90
ctive date is listed, the date must be f filing.)	date of filing:
ctive date is listed, the date must be f filing.)	date of filing:
CVI: Other provisions, if any.	e specific and cannot be more than five business days prior to or 50
Extre date is listed, the date must be filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE:	How
Extree date is listed, the date must be filling.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a	How member or an authorized representative of a member.
REQUIRED SIGNATURE: Signature of a (In accordance with section)	member or an authorized representative of a member. n 605.0203 (1) (b), Florida Statutes, the execution of this document
REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation of a section section).	member or an authorized representative of a member. n 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true.
REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation I am aware that any false in	member or an authorized representative of a member. n 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. nformation submitted in a document to the Department of State
REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation of a may a second and a second a sec	member or an authorized representative of a member. In 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State released as provided for in s.817.155, F.S.)
REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation of a may a second and a second a sec	member or an authorized representative of a member. In 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State released as provided for in s.817.155, F.S.)
REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation of a may aware that any false in constitutes a third degree of a constitute of a co	member or an authorized representative of a member. n 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. nformation submitted in a document to the Department of State
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REQUIRED SIGNATURE: Signature of a (In accordance with section constitutes an affirmation of a management of a constitutes a third degree of the section constitutes at the section co	member or an authorized representative of a member. n 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. nformation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.) Typed or printed name of signee Filing Fees: Organization and Designation of Registered Agent
VI: Other provisions, if any. Signature of a (In accordance with section constitutes an affirmation of a aim aware that any false in constitutes a third degree for the section constitutes at the section consti	member or an authorized representative of a member. n 605.0203 (1) (b), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. nformation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.) Typed or printed name of signee Filing Fees: Organization and Designation of Registered Agent

ARTICLE IV-