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April 7, 2014

JODY FISCHER 9856A WATERMILL CIRCLE BOYNTON BEACH, FL 33437

SUBJECT: TEACHERS GO GLOBAL, LLC

Ref. Number: W14000022013

We have received your document for TEACHERS GO GLOBAL, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 414A00007407

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

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March 20, 2014

To Whom it may concern,

I recently began and dissolved a Non-Profit Corporation called Teachers Go Global Inc. I would like to release the name "Teachers Go Global Inc" to use as an LLC with the name "Teachers Go Global LLC". I am the owner of the LLC as well.

If there are any questions or concerns, you can reach me at Teachersgoglobal@yahoo.com.

Sincerely,

Jody Fischer

Owner

14 APR 15 PM 3: 4

COVER LETTER

| TO: Registration Section Division of Corporations |
|--|
| SUBJECT: Teachers Go 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: |
| Jody Fischer Name of Person |
| Name of Person |
| |
| Firm/Company |
| ace a lall all all |
| 9856A Watermill circle |
| |
| Boynton Beach, FL 33437 City/State and Zip Code |
| teachers and label a un hon. com |
| teachers goglobal @ yahoo, com E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Jody Fischer at (S61) 752-1939 Name of Person Area Code Daytime Telephone Number |
| Name of Person Area Code Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$125.00 Filing Fee & S130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Address Street/Courier Address |
| Registration Section Registration Section Division of Corporations Division of Corporations |
| P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle |
| Tallahassee, FL 32301 |



ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: |
|--|
| Teachers Go Global 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: 9854A Watermill Circle Boynton Beach Fr. 33437 Boynton Beach Fr. 33437 |
| ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) |
| The name and the Florida street address of the registered agent are: Jody Fischer Name 9856A Watermill Circle Florida street address (P.O. Box NOT acceptable) Boynton Beach FL 33437 City 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 605, F.S |
| Registered Agent's Signature (REQUIRED) |
| (CONTINUED) Page 1 of 2 Page 1 of 2 |

ARTICLE IV-

| The name and address of each | person authorized to manage and | control the Limited Liability | Company: |
|------------------------------|---------------------------------|-------------------------------|----------|
| | | | |

| <u>Title:</u> "AMBR" = Authorized Member | Name and Address: | | |
|---|--|--|--|
| "MGR" = Manager $\frac{1}{4} = \frac{1}{8} = \frac{1}{8}$ | Jody Fischer 9854A Watermill circle Boynton Beach 51 | | |
| AM1312 | Rachel Mishica-Anderson 3613 Washington Rd #1 West Palm Beach Fz 33405 | | |
| | | | |
| (Use attachment if necessary) | | | |
| ARTICLE V: Effective date, if other than the date of (If an effective date is listed, the date must be specithe date of filing.) ARTICLE VI: Other provisions, if any. | filing: Ancil 15, 2014. (OPTIONAL) fic and cannot be more than five business days prior to or 90 days after | | |
| REQUIRED SIGNATURE: | 17isch | | |
| (In accordance with section 605.0 constitutes an affirmation under the | ver or an authorized representative of a member. 203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true. It is too submitted in a document to the Department of State is provided for in s.817.155, F.S.) | | |
| Jody | Fischer yped or printed name of signee | | |
| \$125.00 Filing Fee for Articles of Organ \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) | Filing Fees: itzation and Designation of Registered Agent ARA SE SE SE SE SE SE SE SE SE S | | |

Page 2 of 2