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COVER LETTER

Registration Section

TO:

Division of Corporations			
SUBJECT:	MORRISON GLOBAL LLC		
	Name of Limited Liability Company		
The enclosed	d Articles of Organization and fee(s) are submitted for filing.		
Please return	all correspondence concerning this matter to the following:		
_	MICHAEL MURAZZI		
	Name of Person		
<u>-</u>	MORRISON GLOBAL LLC		
	Firm/Company		
	5318 GRANT STREET		
_	Address		
	HOLLYWOOD, FL 33021		
-	City/State and Zip Code		
	MIKEM@MORRISON-GLOBAL.COM E-mail address: (to be used for future annual report notification)		
For further in	nformation concerning this matter, please call:		
	MICHAEL MURAZZI at (954) 258-3669		
	Name of Person Area Code Daytime Telephone Number		
Enclosed is	a check for the following amount:		
□\$125.00 Fil	ling Fee U\$130.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)		
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		

2014 OCT 27 PH 1: 54

ARTICLES OF ORGANIZATION FLORIDA LIMITED LIABILITY COMPANY TALL AHASSEE, FLORIDA

SECRETARY OF STATE

Article I

The name of the Limited Liability Company is:

MORRISON GLOBAL LLC

Article II

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

Principal Office Address: 5318 GRANT STREET HOLLYWOOD, FL 33021

Mailing Office Address: 5318 GRANT STREET HOLLYWOOD, FL 33021

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS

Article IV

The name and Florida street address of the registered agent of the Limited Liability Company is:

MICHAEL MURAZZI 5318 GRANT STREET HOLLYWOOD, FL 33021

Having been named 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.

Registered Agent Signature:

Article V

The name and address of the managing member/members of the Limited Liability Company are:

TITLE: MGR MICHAEL MURAZZI 5318 GRANT STREET HOLLYWOOD, FL 33021

Signature of member or authorized representative of the Limited Liability Company:

Required Signature: