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COVER LETTER

	egistration Section ivision of Corporations			
SUBJECT	E & G Consulting Services LLC	;		
- ·		of Limited Liabil	ity Company	
The enclos	ed Articles of Organization and fee	(s) are submitted	for filing.	
Please retu	rn all correspondence concerning th	nis matter to the	following:	
	Eitan Ganz			
		Name of	Person	
		Firm/Co	mpany	
	8611 Villa Point, Apt. 1233			
		Addr	ess	
	Orlando, FL 32810			
	eitanganz111@gmail.com	City/State an	d Zip Code	
For further i	E-mail address: (to be nformation concerning this matter,		nnual report notification)	
1 of father t	Eitan Ganz	971 at (227-6214	
	Name of Person	Area Code	Daytime Telephone Number	
Enclosed is	iling Fee \$130.00 Filing Fee Certificate of Statu	& \$155.0	ed Copy Certific al copy is enclosed) Certific	Filing Fee, cate of Status & Copy al copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	TS DEC 14

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

ARTICLE I - Name:	lit. Carrage in			FILED
The name of the Limited Liabi	nty Company is:			15 pro
na o o a ar				15 DEC 14 PM 1: 43
E & G Consulting	Services LLC d with the words "Limited	I Liability Company	, "IIC "or "IIC")	FORT ARY OF STATE
(iviust cir	d with the words. Ellintet	Liabinty Company	, E.E.C., Of EEC.)	FECRETARY OF STATE INTERESTED FLORIDA
ARTICLE II - Address: The mailing address and street	address of the principal of	office of the Limited	Liability Company is:	· · · · · · · · · · · · · · · · · ·
-		and of the Billion		
Princi	pal Office Address:		Mailing Addre	<u>:ss</u> :
	8611 Villa Point, Apt. 1233		ne	
Orlando, FL 32810	<u> </u>			
ARTICLE III - Registered A	gent, Registered Office,	& Registered Age	nt's Signature:	
(The Limited Liability Compar			You must designate an indi	ividual or
another business entity with ar	n active Florida registration	on.)		
The name and the Florida stree	t address of the registered	d agent are:		
		J		
	Eitan Ganz	Name		
		Name		
	8611 Villa Point, Ap			
	Florida street addres	s (P.O. Box <u>NOT</u> a	cceptable)	
	Orlando	FL	32810	
	City	State	Zip	
Having been named as registered place designated in this certificate				
further agree to comply with the				
am familiar with and accept the	obligations of my position	as registered ogent	as provided for in Chapter	605, F.S
			<i>\</i> \	
	<u> 4</u>	04 () M	\sim //	
	Regist	ered Agent's Signa	ure (REQUIRED)	
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		(CONTINUED)	\	
		(CONTINUED)	\	
		Page 1 of 2		

ARTICLE IV-

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

	Title:	N. Garanta and	Name and Address:		
	"AMBR" = Authorized: "MGR" = Manager	Member			
	AMBR		Eitan Ganz		
	THINDK		8611 Villa Point, Apt. 1233 Orlando, FL 32810		
					
				· · .·	
					
	(Use attachment if neces	seary)			
	(Coo academion ii neces	our y y			
ARTICL	EV: Effective date, if of	ther than the date of filing:		. (OPTIONAL)	
ARTICL	JE VI: Other provisions, i	fany.			
	REQUIRED SIGNATURES	$P_{i}I_{i}F_{i}$	an authorized representative of a ordance with section 60 v0203 (1) tion submitted in a document to the	a member.	
	I nis do I am aw constitu	are that any false informates a third degree felony a	tion submitted in a document to the s provided for in s.817.155, F.S.	Department of State	
	I	Eitan Ganz			
			or printed name of signee		
	\$ 30.00 Certified Co	r Articles of Organizatio	Filing Fees: on and Designation of Registered	Agent 15 0EC 14	<u>.</u>
		P	age 2 of 2	F. F. C.	ח כ