

L17000122462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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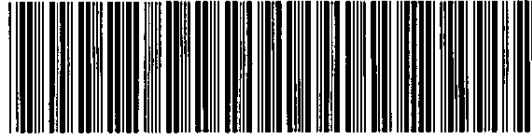
(Business Entity Name)

(Document Number)

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Date: June 06, 2017

Account#: I20000000088

Name: Marisa Kugelmann

Reference #: D302820

Entity Name: LIZAS MANAGEMENT, LLC

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

17 JUN -6 PM 3:00
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Please include a copy of cover letter with returned evidence. Thanks!

Authorized Amount: \$ 125

Please note: If authorized amount is incorrect,
 please call Michelle at 518-213-0737.

Signature: Michelle Walker

✉ **CORPORATE HQ**
 COGENCY GLOBAL INC
 10 E 40TH ST 10TH FL
 NY, NY 10016
 800.221.0102
 +1.212.947.7200

✉ **EUROPEAN HQ**
 COGENCY GLOBAL (UK) LIMITED
 REGISTERED IN ENGLAND & WALES
 (REGISTRY NUMBER)
 6 BEVIS MARKS, 11TH FL
 LONDON EC3A 7BA
 +44 (0)20.3786.1090

✉ **ASIA PACIFIC HQ**
 COGENCY GLOBAL (HK) LIMITED
 A HONG KONG INCORPORATED COMPANY
 INFINITIUS PLAZA 12TH FL
 199 DLS VOLUX RD CENTRAL
 HONG KONG
 +852.3975.1803

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LIZAS Management, LLC

(Must contain 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:

1720 Peachtree Street NW, Suite 520
Atlanta, GA 30309

Mailing Address:

1720 Peachtree Street NW, Suite 520
Atlanta, GA 30309

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:

Corporation Service Company
Name

1202 Hays Street
Florida street address (P.O. Box **NOT** acceptable)

<u>Tallahassee</u>	<u>Florida</u>	<u>32301</u>
City	State	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..

Janette Schurman Assistant Secretary
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Marc Vach

Lilienthalstrasse 9

30179 Hannover, Germany

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

S. Meis

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.

I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Sebastian Meis

Typed or printed name of signee

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)