

**Electronic Articles of Organization
For
Florida Limited Liability Company**

**L18000142950
FILED 8:00 AM
June 05, 2018
Sec. Of State
mtmoon**

Article I

The name of the Limited Liability Company is:

EXCLUSIVE HOME GUIDE LLC

Article II

The street address of the principal office of the Limited Liability Company is:

3389 SHERIDAN ST
629
HOLLYWOOD, FL. US 33021

The mailing address of the Limited Liability Company is:

3389 SHERIDAN ST
629
HOLLYWOOD, FL. US 33021

Article III

Other provisions, if any:

FOR ALL INTENTS AND PURPOSES

Article IV

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

SHIRLEY ZIV
3389 SHERIDAN ST
629
HOLLYWOOD, FL. 33021

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.

Registered Agent Signature: SHIRLEY ZIV

Article V

The name and address of person(s) authorized to manage LLC:

Title: MGRM
SHIRLEY ZIV
3389 SHERIDAN ST #629
HOLLYWOOD, FL. 33021 US

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Article VI

The effective date for this Limited Liability Company shall be:

06/05/2018

Signature of member or an authorized representative

Electronic Signature: SHIRLEY ZIV

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

L18000142950

AFFIDAVIT

I, Shirley Ziv, am stating that I have no intention of revoking the dissolution of Document Number (L17000166629), therefore, releasing the name for use to another entity.

STATE OF FLORIDA)
COUNTY OF BROWARD) SS

Shirley Ziv
PRINT FULL NAME

[Signature]
SIGNATURE

Sworn to and subscribed before me this 7 day of June, 2018.

[Signature]
Notary Public

Notary Seal

Gary Agenord
Notary Public
State of Florida
My Comm. Exp. 10/24/2020
Commission No. GG 41471

Shirley Ziv
954-290 6565

FILED
18 JUN 11 AM 11:31
CLERK OF DISTRICT COURT
JUDICIAL CIRCUIT IN AND FOR
THE SEVENTH JUDICIAL CIRCUIT
IN FLORIDA