

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Three Cord Global Enterprises, 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:

Donald J. Davis

Name of Person

Three Cord Global Enterprises, LLC

Firm/Company

4001 Santa Barbara Blvd. # 402

Address

Naples, FL 34104

City/State and Zip Code

dondavis85@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Don Davis

615

513-3407

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐

\$125.00 Filing Fee

☒

\$130.00 Filing Fee &
Certificate of Status

☐

\$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐

\$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional 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

ARTICLE I - Name:

Three Cord Global Enterprises, LLC.

ARTICLE II - Address:

Principal Office Address:

Mailing Address:

Donald J. Davis

Name

668 Lambton Lane

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

Naples

Florida

34104

City

State

Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Donald J. Davis
668 Lambton Lane
Naples Fl. 34104

AMBR

Brenda M. Davis
668 Lambton Lane
Naples Fl. 34104

(Use attachment if necessary)

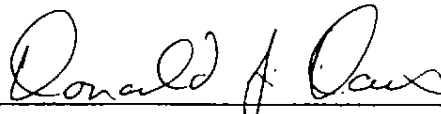
ARTICLE V: Effective date, if other than the date of filing: April 1, 2019. (OPTIONAL)

(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:



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.

Donald J. Davis

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)

19 APR 11 AM 10:38
Filing Fee: \$125.00
Certified Copy: \$30.00
Certificate of Status: \$5.00
Total: \$160.00