Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : BELOFF LAW, P.A. Account Number : 12008000000 Phone : (305)673-1101 Fax Number : (305)673-5505

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

FLORIDA LIMITED LIABILITY CO. TGGF DEVELOPERS LLC

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$160.00

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COVER LETTER

To:

١

Registration Section/Division of Corporation

Subject:

New Entity Filing

Entity Name:

TGGF Developers LLC

Memo: The enclosed Articles of Organization and Fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Will Prince, Esq.
Beloff Law, P.A.
1691 Michigan Avenue
Suite 250
Miami Beach, FL 33139
Telephone: 305-673-1101

Fax: 305-673-5505

Email Address: Sherry@BeloffLawPA.com

Requested Items:

Entity Filing
Certificate of Status
Certified Copy

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ARTICLES OF ORGANIZATION FOR TGGF DEVELOPERS LLC a Florida Limited Liability Company

The undersigned, desiring to form a Limited Liability Company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

ARTICLE I- NAME:

The Name of the Limited Liability Company is: TGGF DEVELOPERS LLC

ARTICLE II- ADDRESS:

The Address of its Principal Place of Business, as well as the Mailing Address for this Limited Liability Company is: 776 NE 73rd Street, Miaml, FL 33138

ARTICLES III- REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE:

The Name and the Florida Address of the Registered Agent are:

Eyal Kessous, 776 NE 73rd Street, Miami, FL 33138

Having been named as registered agent and to accept service of process for the above state limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this especity. 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, P.S.

Eyal Kessous, Registered Agent

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ARTICLE	IV-

The Name and Address of Each Person Authorized to Manage and Control the Limited Liability Company:

TITLE:

NAME AND ADDRESS:

Manager

Eyal Kessous 776 NE 73rd Street Miami, FL 33138

ARTICLE V-

Effective Date, if other than the date of filing:

_____(Optional)

ARTICLE VI- Other provisions, if any.

REQUIRED SIGNATURE:

Eyal Kessous, Manager

3 41111:

(3)

(In accordance with Section 605.0203 (1)(b), Florida Statute, the execution of this document constitutes an affirmation under the penalties of perjury that the focis stated herein are true. 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 1817.155, F.S.)