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			COVER LETTER	ર કેં	* •			
A	₩. ₩	Registration Section Division of Corporations		جو				
	SUBJE	Syscon financial consulting	g LLC					
			ame of Limited Liability	Company				
	The enc	losed Articles of Organization an	d fee(s) are submitted for	filing.				
	Please n	eturn all correspondence concern	ing this matter to the follo	owing:				
	Cheyenne Moseley, Legalzoom.com, Inc.							
	Name of Person							
		101 N. Brand Blvd., 10th Fl	001					
			Address					
		Giendale, CA 91203						
		City/State and Zip Code onlinefilings@Legalzoom.com						
			(to be used for future ann	ual report notification)				
	For furth	er information concerning this ma	atter, please call:					
		Cheyenne Moseley	323 (962-8600 ext. 7625				
		Name of Person		Daytime Telephone N	lumber			
	Enclose	d is a check for the following am	ount:					
	\$125.00	D Filing Fee S130.00 Filin Certificate of	Status Certified	opy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclos	ed)		
		<u>Mailing Address</u> New Filing Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32344	Ne Dis Di Cl I 26	reet Address w Filing Section vision of Corporations ifton Building 61 Executive Center C illahassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Syscon financial consulting LLC

(Must end with 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:	Mailing Address:
Isaak Kai Solomou St	
Peyia Hills Complex Apt 207 Block 3,	
Pcyia Paphos, Cyprus 8575	
ARTICLE III - Registered Agent, Registered Office, & Register (The Limited Liability Company cannot serve as its own Registered another business entity with an active Florida registration.)	e e
The name and the Florida street address of the registered agent are:	
United States Corporation Agen	ts, Inc.

	Name	
5575 S. Semoran Bl	vd. Suite 36	
Florida street addres	is (P.O. Box <u>NOT</u> acc	eptable)
Orlando	Florida	32822
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..

Registered Agent's Signature (REQUIRED) Chy and Howly, United Series Corporation Age

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(Use attachment if necessary)		
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REOUIRED SIGNATURE: Signature of a member or This document is executed in act I am aware that any false informe	map authorized representative of a member.	2020
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