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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HARVARD BUSINESS SERVICES, INC.

Account Number : I20080000045 Phone : (302)645-7400

Fax Number : (302)645-1280

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

Email Address: sanyer.betancur@gmail.com

FLORIDA LIMITED LIABILITY CO.

Pitzer Global Group LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is: Pitzer Global Group 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: Mailing Address: 394 conservation dr 394 conservation dr Weston, Fl 33327 Weston, FI 33327

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.)

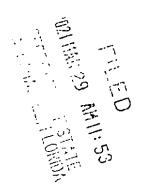
The name and the Florida street address of the registered agent are:

Registered Agents I	nc.	
	Name	
7901 4th Street N. S	te 300	
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
St. Petersburg	FL	33702
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)

(CONTINUED)



ARTICLE IV-

(((H21000126009 3)))

Title:	Name and Address:
"AMBR" = Authorized Me	ember
"MGR" = Manager	
AMBR	Sonia Maria Pitzer
	394 conservation dr Weston, Fl 33327
	11 CMM, 11 25527
ective date is listed, the da of filing.) the date inserted in this blo ment's effective date on the	re than the date of filing:
EV: Effective date, if other ective date is listed, the da of filing.) the date inserted in this blo	re than the date of filing:
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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)

