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(((H21000227290 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : UNITED AGENT SERVICES LLC

Account Number : 120210000087 Phone : (866)246-2669 Fax Number : (520)333-2793

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

Email Address: Compliance Qurited agent Services com

FLORIDA LIMITED LIABILITY CO. LC Global Service USA L.L.C.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	•
ARTICLE I - Name:	·
The name of the Limited Liability Company is:	,
	•
	:
LC Global Service USA L.L.C.	•
(Must contain the words "Limited Liabili	ly Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office o	f the Limited Liability Company is
Principal Office Address:	Malling Andress:
9100 Conroy Windermere Road #200-UAS,	9100 Conroy Windermere Road #200-UAS,
Windermere, FL 34786	Windermore, FL 34786
	•
ARTICLE III - Registered Agent, Registered Office. & Reg	

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

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

another business entity with an active Florida registration.)

United Agent Service	res LLC	
9100 Conroy Winde	ermere Road #200-U.	AS,
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
Windermere	Ft.	34786
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..

Gegistered Agent's Signature (REQUIRED)

(CONTINUED)

(((H21002272903))

(((H210002272903)))

IAMBR = Authorized Member **MGR** = Manager **AMIBR** **Corona Luigi Via Francesco Agello 77 PT. 80144 Nanoli, Italy **		
*MGR" ¬ Manager AMBR Corona Luigi Via Francesco Angello 77 PT. 80144 Nanoli, Italy CLE V: Effective date, if other than the date of filing: (OPTIONAL) Siffective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days as et of filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list coment's effective date on the Department of State's records. CLE VI: Other provisions, if any, empany is registered as business continuation of the Italian Limited Liability Company: "LC GLOBAL SERVICE w/registered office in Piazza Don Luigi Sturzo n. 15,00144 Roma(RM)- Italy Euro 1,000.00 fully paid-up capital. Company House reg. and tax code #15910391000, Rome R.E.A. # RM-1622335 REQUIRED SIGNATURE: Signature of a member or angusthorized representative of a member.) This document is executed in accordance with section 605.0203 (1) (2), Florida Statutes. I am aware that any false information submitted in a document to the constitutes a third degree felony as provided for in s.817.155, F.S. Ruthy Willard Typed or printed name of signee Filling Fees;		Name and Address:
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